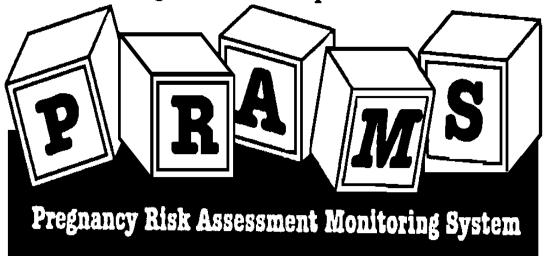
Volume IV

July 2002

The Washington State Department of Health



1996-1998 Surveillance Report

Physical Abuse Around the Time of Pregnancy

Infant Safety

Infant Sleeping Position

Stress and Support Around the Time of Pregnancy



1996-1998 Washington State Pregnancy Risk Assessment Monitoring System (PRAMS) Surveillance Report

July 2002



Community and Family Health

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Executive Summary

Since June of 1993, the Office of Maternal and Child Health (MCH), Washington State Department of Health (DOH) has been collecting Pregnancy Risk Assessment Monitoring System (PRAMS) data.¹ PRAMS is an ongoing, population-based surveillance system sponsored by the Centers for Disease Control and Prevention (CDC) and designed to generate state-specific data on maternal behaviors and experiences before, during, and after pregnancy among residents who delivered live-born infants.² We are pleased to present the fourth and final volume of the 1996-1998 Washington State PRAMS surveillance report, a collection of PRAMS findings on various MCH indicators.

Volume Four of the 1996-1998 Washington State PRAMS Surveillance report provides information on MCH indicators relative to physical abuse around the time of pregnancy, infant safety, infant sleep position, and stress and social support around the time of pregnancy. Subgroup analyses are stratified by selected maternal characteristics; results from these analyses are displayed in graphic and tabular form. For certain topics, 5-year trends are also presented.

The 1996-1998 Washington State PRAMS Surveillance Report was designed to serve as a descriptive review of the pregnancy and early postpartum experience of 6,034 women in Washington State who had live births from April 1996 through December 1998. The average response rate for this study period was approximately 70 percent, which is considered by PRAMS operational and technical staff at the CDC as a minimum threshold below which unacceptable response bias may occur. When a response rate drops below this threshold, state data are not included in national estimates. This report will also serve as a source of information for public health professionals and policy makers in developing and monitoring programs and policies designed to improve the health of mothers and children in Washington State.

References:

¹ <u>Pregnancy Risk Assessment Monitoring System (PRAMS) Surveillance Report: 1993-1994</u>. Maternal and Child Health Assessment Section, Community and Family Health, Washington State Department of Health, 1996.

² Colley GB, Johnson CH, Morrow B, Ahluwalia IB, Gaffield ME, Fischer L, Rogers M, Whitehead N. <u>PRAMS 1997 Surveillance Report</u>. Atlanta, GA: Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention, 1999.

Data Highlights

The following are key findings on each of the four topic areas featured in Volume Four of the 1996-1998 Washington State PRAMS Surveillance Report:

Physical Abuse Around the Time of Pregnancy

	Almost 31 percent of women reported a prenatal health care provider discussed physical abuse of women by their husbands or partners.
	Nearly six percent of women reported being physically abused during the 12 months before they got pregnant with their new baby; 4.2 percent of them reported being physically abused by their husband or partner. Approximately 91.4 percent of women said they were not physically abused during the 12 months before pregnancy.
	Four percent of women said they were physically abused during their most recent pregnancy; 3.1 percent of them were reported being physically abused by their husband or partner. An estimated 94.5 percent of women said they were not physically abused during their most recent pregnancy.
	Compared to 12 months before pregnancy to their most recent pregnancy, 17.6 percent of women said they were physically abused about the same, 24.3 percent said they were physically abused more often, and 35.3 percent said they were physically abused less often.
Infar	nt Safety
	Approximately 60.7 percent of prenatal health care providers discussed seatbelt use during pregnancy.
	Almost all (99.2%) women said they placed their baby in a car safety seat the last time he or she rode in a car.
	The proportion of women who said they have a working smoke alarm that has been tested in the past year was 92.9 percent.
	An estimated 82.8 percent said they turned down or set their hot water heater to 120°F or below.
	Among the women who said they had firearms in their homes (28.0%), 58.4 percent said they were in locked storage areas; 51.2 percent said they had firearms with trigger locks; and 17.7 percent said they were loaded.

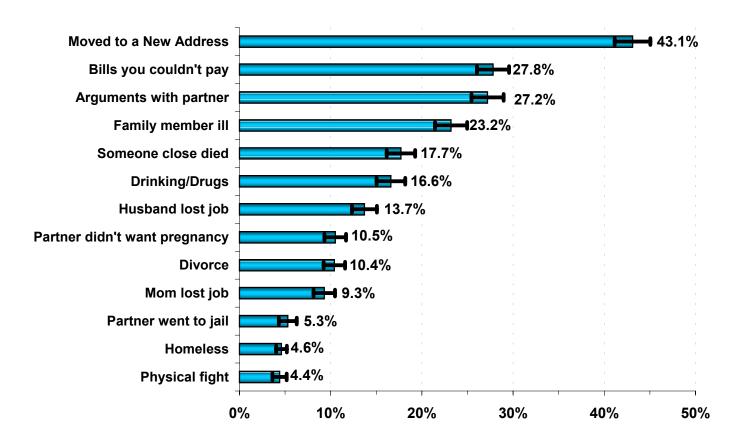
Infant Sleeping Position

☐ An estimated 54.2 percent of the women said they placed their baby to sleep on their back most of the time; 33.5 percent of them said they placed the baby to sleep on their side most of the time; and 12.2 percent of them said they placed their baby to sleep on their stomach most of the time.

Stress and Social Support Around the Time of Pregnancy

The four most frequently reported stressful events that occurred during the 12 months before pregnancy were: moving to a new address (43.1%), had a lot of unpaid bills (27.8%), had more arguments than usual with their husband or partner (27.2%), and had a close family member who was very sick and had to go into the hospital (23.2%).

Stressful Events during the 12 Months before Delivery



Approximately 82.7 percent of women said their husband or partner would have helped them with a problem during their most recent pregnancy.
☐ According to the mother, the most frequently reported assistance available to them during their most recent pregnancy was a ride to the doctor's office (92.5%).



Introduction

The Pregnancy Risk Assessment Monitoring System (PRAMS) is part of the Centers for Disease Control and Prevention (CDC) initiative to reduce infant mortality and low birth weight. PRAMS is an ongoing, population-based surveillance system administered by the Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion at the CDC in conjunction with various state programs. In 1987, PRAMS was designed to identify and monitor selected self-reported maternal behaviors and experiences that occur before, during and after pregnancy and during the child's early infancy among a stratified sample of mothers delivering a live-born infant. PRAMS was also designed to supplement vital records data and to generate state-specific data for developing and assessing Maternal and Child Health (MCH) programs on a state level.

Since June of 1993, the Office of MCH within the Washington State Department of Health has been collecting PRAMS data. Each month, 1 in 40 births are randomly selected from the Washington State birth certificates. At two to six months postpartum, Washington State PRAMS sends a packet containing an explanatory letter and the PRAMS questionnaire to 100-250 sampled mothers. Ten days after the initial mailing, mothers are sent a reminder letter to serve as a thank you. Two weeks after the reminder letter, mothers who do not respond to the first mailing are sent a second mail questionnaire packet. Two weeks after the second mailing of the questionnaire, Washington State PRAMS staff contacts the mothers who do not respond to the mail survey and attempt to conduct telephone interviews in English or Spanish.^{2,3}

In December of 1996, Washington State published the first PRAMS report that summarized information from mothers who delivered infants in Washington State from April 1993 through December 1994.³ This current report is the fourth and final volume of the 1996-1998 Washington State PRAMS Surveillance Report, a compilation of PRAMS data on MCH indicators on 6,034 randomly selected mothers who delivered live born infants in Washington State from April 1996 through December 1998. This sample represents a 70 percent response rate of 8,563 women surveyed during Phase III of the PRAMS survey. For additional information regarding the sampling plan for Washington State PRAMS, please refer to Appendix B.

Volume Four covers the following topics: physical abuse around the time of pregnancy, infant safety, infant sleeping position, and stress and support. This report includes the characteristics of the PRAMS sample population, response rates, data highlights, four narrative sections presenting the public health importance of each topic, prevalence estimates and subgroup analyses by selected maternal characteristics, and trends. An analysis of each survey question is presented in graphic and tabular form.

For this report, responses to the PRAMS questions are stratified by the following maternal characteristics obtained from the Washington State birth certificates: age at conception (<20, 20-24, 25-34, 35+ years), race/ethnicity (White/Other/Unknown, African American, Native

American, Asian/Pacific Islander, and Hispanic ethnicity), level of education at delivery (<12, 12, >12years), marital status at delivery (married, unmarried), and baby's birth weight (< 2500 grams, ≥ 2500 grams). Washington State PRAMS oversampled African Americans, Native Americans, Asian Pacific Islanders, and ethnic Hispanics to create (including whites) five strata. The purpose of oversampling was to increase the reliability of estimates for these minority groups. All women less than 20 years of age were grouped in the same strata due to insufficient numbers to support finer divisions of age groups delineation. Table 1.1 (pg. 8) provides the demographic characteristics of the Washington State resident birth mothers for all state births and PRAMS sample participates in this time period.

Information on whether Medicaid paid for prenatal care services for the mother and delivery of the infant was obtained from the linkage between the Washington State PRAMS data and the Washington State First Steps Database (maintained by the Department of Social and Health Services, Research and Data Analysis Division). Women who meet the Medicaid criteria were divided into three groups: Cash Assistance, Pre-First (FS) Medicaid Only, and First Steps Expansion. "Cash Assistance" is defined as very low-income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid. "Pre-First Steps (FS) Medicaid Only" is defined as low-income women (below 90% federal poverty level) eligible for Medicaid only. This group includes women not eligible for cash assistance. "First Steps Expansion" is defined as women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups. "Non-Medicaid recipients" are women not enrolled in Medicaid. For this report, responses to PRAMS questions were stratified by Medicaid total (Cash Assistance, Pre-First (FS) Medicaid Only, and First Steps Expansion) and Non-Medicaid. Information on Medicaid status involvement is important both as an indicator of poverty status and its many attendant health risks, and because the expansion of Medicaid funding for pregnant women in Washington State has been a major component of MCH policy.²

For some topics, responses to PRAMS questions are stratified by site of prenatal care visit (Hospital Clinic, Health Department Clinic, Private Doctor's Office, Military Facility Clinic, Community or Migrant Health Clinic, and Other Clinic). This information is obtained from mother's response to the PRAMS survey question: "Where did you go *most of the time* for the prenatal visits?"

All tables in the report were produced using weighted PRAMS data. Percentages and standard errors were calculated for the characteristic of interest using PROC CROSSTAB in SUDAAN.³ The 95% Confidence Intervals (CIs) were computed using the formula CI = percentage + 1.96 * standard error. The sample size, reported in each table, is the number of mothers who answered the corresponding PRAMS question.

All missing (blank and "don't know") observations are excluded. The percentage of missing values is noted when it equals or exceeds 10 percent. Because estimates based on small sample size are imprecise and may be biased, estimates where the underlying number of respondents were fewer than 60 are noted in the table as "may not be reliable." Respondents fewer than 30 are not reported and are noted in the tables.

Further information on PRAMS can be found in the appendices. Appendix A describes the Washington State PRAMS data collection instrument and procedures. Appendix B explains the

Washington State PRAMS sampling and weighting process. Appendix C displays the trend data for questions that were asked in Phase II (January 1994 through March 1996) and Phase III (April 1996 through December 1998) of the PRAMS questionnaire. Appendix D lists the topics for Volume I-IV, the states participating in PRAMS from April 1996 through December 1998, and the web sites to CDC, Washington State PRAMS, and Washington State Department of Health.

This report has been prepared by technical and program staff of the Office of MCH in the Community and Family Health Division at the Washington State Department of Health. It is hoped that the PRAMS data presented in this surveillance report can be used by public health professionals and policy makers to design and implement interventions and policies to improve the long-term health of the mother and children. In addition, this report may also assist in completing the requirements for Title V MCH Block Grant applications, as well as generating hypotheses to be explored in future studies.

References:

¹ <u>Pregnancy Risk Assessment Monitoring System (PRAMS) CDC Model Surveillance Protocol 1999.</u> Maternal and Child Health Assessment Section, Community and Family Health, Washington State Department of Health, 1996.

² <u>Pregnancy Risk Assessment Monitoring System (PRAMS) Surveillance Report: 1993-1994</u>. Maternal and Child Health Assessment Section, Community and Family Health, Washington State Department of Health, 1996.

³ Colley Gilbert B, Johnson CH, Morrow B, Ahluwalia IB, Gaffield ME, Fischer L, Rogers M, Whitehead N. <u>PRAMS 1997 Surveillance Report</u>. Atlanta, G: Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease and Prevention, 1999.

Table 1.1: Demographic Characteristics of Washington State Resident Birth Mothers

Washington State PRAMS 1996-1998

Maternal			WA PRAMS	WA PRAMS
Characteristics ^a	State Total	% State Total	Total	%Total ^b
Total ^c	217,205	100.0	6,034	100.0
Maternal Age				
<20 years	23,838	11.0	1,021	13.7
20-24 years	51,667	23.8	1,557	23.2
25-34 years	112,137	51.6	2,876	52.7
35+ years	29,474	13.6	579	10.4
Race/Ethnicity ^d				
White	157,471	72.5	1,410	74.9
African American	7,925	3.7	969	3.8
Native American	4,600	2.1	1,252	2.2
Asian/Pacific Islander	13,959	6.4	1,208	6.7
Hispanic	26,267	12.1	1,195	12.4
Maternal Education ^e				
<12 years	35,302	18.1	1,323	17.9
12 years	61,869	31.7	1,717	32.1
>12 years	98,002	50.2	2,331	49.9
Marital Status				
Married	157,168	72.4	3,842	72.7
Unmarried	59,527	27.4	2,181	27.3
Medicaid Status				
Medicaid ^f	90,319	41.8	3,201	40.3
Cash Assistance ⁹	31,707	14.7	1,137	13.1
Pre-First Steps (FS) Medicaid Only ^h	23,875	16.1	1,266	16.5
First Steps Expansion	34,689	11.0	798	10.8
Non-Medicaid ^j	125,865	58.2	2,817	59.7
	123,003	30.2	2,017	39.1
Baby's Birth Weight (grams)	12,207	5.6	355	5.0
Low Birth Weight (<2500 g) Normal Birth Weight (≥2500 g)	204,422	94.4	5,664	95.0
• · <u> </u>	204,422	94.4	5,004	95.0
Site of Prenatal Care Visit	к	к		
Hospital Clinic	_K _K	_k _k	1,594	19.9
Health Department Clinic	 _k	 _k	523	5.7
Private Doctor's Office	 _k	 _k	2,731	60.3
Military Facility	- _k	- _k	240	3.5
Community or Migrant Health Center	_ _k	- _k	252	2.9
Other Clinic	_K	_ ^K	530	7.7

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates;

Medicaid status from linkage with Washington State First Steps Database. White includes other/unknown (3.5%).

^bPercentage weighted to Washington State Birth Population (Total N = 207,831).

^cRefers to surveillance period from April 1996 through December 1998.

^dHispanic Ethnicity was missing on 3.2% of the Washingtron State birth certificates.

^e10% or more of the maternal education data are missing from birth certificate data.

^fMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion

⁹Cash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

^hPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

^JNon-Medicaid - women not enrolled in Medicaid.

^kInformation not available from Washington State birth certificates.

PHYSICAL ABUSE AROUND THE TIME OF PREGNANCY

WASHINGTON STATE PRAMS 1996-1998



Domestic Violence:

PHYSICAL ABUSE AROUND THE TIME OF PREGNANCY

Physical violence against women during pregnancy is recognized as a serious health concern for the mother and the infant. Women who are involved in violence or who are physically assaulted during their pregnancy are significantly more likely to have fetal death or distress, to have preterm labor to have fetal bone fracture, rupture of the mother's uterus and antepartum hemorrhage. Physical violence during pregnancy is significantly associated with adverse health outcomes, including low birth weight, poor maternal weight gain, infection, anemia, and risky behaviors such as smoking, alcohol use, and drug use. 6,7,8

National estimates for assaults to pregnant women range from 0.9% to 20%, with the majority of studies reporting in the range of 3.9% - 8.3% depending upon the study definition of assault and the population studied (Gazmararian, 1999). Domestic violence is a pattern of assaultive and coercive behaviors that include physical, sexual and psychological attacks. The lack of well-established instruments for measuring psychological abuse, threats and denigrating remarks, limits most prevalence statistics to physical assaults, although physical violence is just one aspect of domestic violence.

Washington State statistics indicate that one in five women age 18 or older reported experiencing some physical injury from an intimate partner during their lifetime (BRFSS).¹⁰ Mothers responding to the PRAMS Questionnaire, which asked whether they were physically abused by a husband/partner 12 months prior to the pregnancy and during the most recent pregnancy, in 1996-98 reported a prevalence between 3.1% to 4.3% (a total of approximately 3,500 women per year).

Those PRAMS mothers who most frequently reported physical assault by a partner tended to be: young (under 20 years of age), have mistimed or unintended pregnancies, be unmarried, low income and have fewer than 12 years of education. These risk factors are consistent with national studies. Yet recent studies suggest that this is a surface view of a very complex issue. ¹¹ The data could be the result of who feels free to disclose violence rather than a true estimate of the experience of physical violence. Further study is warranted.

The Healthy People 2010 objective of reducing the rate of physical assault by current or former intimate partners to 3.3 physical assaults per 1,000 persons aged 12 years or older has reinforced the Washington State Department of Health recommendation for universal screening for physical abuse during prenatal visits and postpartum. Prenatal visits are frequent, usually provide time alone with the woman and allow a safe environment to screen and educate about domestic violence. The Department has also developed training, linkage and consultation for providers to community domestic violence agencies.

References:

¹ American College of Obstetricians and Gynecologists. <u>The Battered Woman.</u> Technical Bulletin No. 124. <u>An Educational Aid to Obstetrician-Gynecologists: Domestic Violence</u>, Technical Bulletin Number 209 Washington, DC: American College of Obstetricians and Gynecologists, 1989.

² Centers for Disease Control and Prevention. Physical violence during the 12 months preceding childbirth – Alaska, Maine, Oklahoma, and West Virginia, 1990-1991. <u>MMWR</u> 1994;43:132-7.

³ Dye TD, Tollivert NJ, Lee RV Kenney CJ. Violence, pregnancy, and birth outcome in Appalachia. <u>Paediatr Perinat</u> Epidemiol 1995;9:35-47.

⁴ Pearlman MD, Tintinalli JE, Lorenz RP. Blunt trauma during pregnancy. N Engl J Med 1990;323:1609-13.

⁵ Sammons LN. Battered and pregnant. <u>AM J Matern Child Nurs</u> 1981;6:246-50.

⁶ Parker B, McFarlane J, Soeken K. Abuse during pregnancy: effects on maternal complications and birth weight in adult and teenage women. <u>Obstet Gynecol</u> 1994; 84:323-8.

⁷ Gazamararian JA, Adams MM, Saltzman LE, Johnson CH, Bruce FC, Marks JS, Zahniser SC. The relationship between pregnancy intendedness and physical violence in mothers of newborn. <u>Obstet Gynecol</u> 1995

⁸ Dietz PM, Gazmararian JA, Goodwin MM, Bruce FC, Johson CH, Rochat RW. Delayed entry into prenatal care: effect of physical violence. Obstet Gynecol 1997; 90: 221-4.

⁹Gazmararian JA, Lazorick S, Spitz AM, Ballard TJ, Saltzman LE, Marks JS. Prevalence of violence against pregnant women: a review of the literature. <u>JAMA</u> 1996;275:1915-20.

¹⁰ Behavioral Risk Factor Surveillance System, Washington State, 1998. For more information contact Katrina Wynkoop Simmons at 360-236-4322.

¹¹ Campbell, JC, Torres S, Ryan J. etal Physical and nonphysical partner abuse and other risk factors for low birth weight amoung full term and pre term babies: a multiethnic case-control study Am J Epidemiol., 1999; 150:714-726.

¹² U.S. Department of Health and Human Services. <u>Healthy people 2010</u> (Conference edition, in two volumes). Washington, DC: January 2000.

Survey Question #16:

During any of your prenatal care visits, did a doctor, nurse, or other health care worker talk with you about any of the things listed below? For each thing, please circle Y (Yes) if someone talked with you about it or N (No) if no one talked with you about it.

m. Physical abuse to women by their husbands or partners.

No (69.1%)

Yes (30.9%)

Summary of Results:

Prenatal Health Care Provider Discussion of Physical Abuse by Husband or Partner (Table 2.1 & Figure 2.1)

- □ Nearly one-third (30.9%) of women reported that a prenatal health care provider discussed physical abuse to women by their husbands or partners. These women were more likely to be:
 - Hispanic
 - Women with less than 12 years of education
 - Unmarried
 - Medicaid recipients (specifically Pre-First Steps Medicaid Only)
- ☐ Teenagers (41.7%) were significantly more likely to report a prenatal health care provider discussed physical abuse to women by their husbands or partners compared to women aged 25 to 34 (26.0%) and women 35 years or older (26.2%).
- □ Nearly sixty percent (59.0%) of women who received prenatal health care services at a health department clinic said a prenatal care provider talked with them about physical abuse to women by husband or partners.
- ☐ Women who reported a prenatal health care provider discussed physical abuse to women by their husbands or partners did not significantly differ by the infant's birth weight status.

Table 2.1: Women who reported a prenatal health care provider discussed physical abuse to women by their husbands or partners

Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yes ^b	95% CI	
Characteristics ^a	(n= 5,839)	(n= 2,259)	(%= 30.9)	(29.1-32.7)	
Maternal Age					
<20 years	987	479	41.7	(36.4-47.0)	
20-24 years	1,506	677	37.7	(33.8-41.6)	
25-34 years	2,788	925	26.0	(23.6-28.4)	
35+ years	557	178	26.2	(20.9-31.5)	
Race/Ethnicity					
White	1,388	346	25.2	(22.8-27.6)	
African American	943	389	41.5	(38.6-44.4)	
Native American	1,209	462	39.3	(36.8-41.8)	
Asian/Pacific Islander	1,139	392	35.7	(33.0-38.4)	
Hispanic	1,160	670	58.1	(55.4-60.8)	
Maternal Education ^c					
<12 years	1,266	713	50.2	(45.5-54.9)	
12 years	1,658	679	32.3	(29.0-35.6)	
>12 years	2,297	617	23.2	(20.7-25.7)	
Marital Status					
Married	3,741	1,294	27.8	(25.8-29.8)	
Unmarried	2,089	962	39.3	(35.6-43.0)	
Medicaid Status					
Medicaid ^d	3,071	1,523	42.8	(39.9-45.7)	
Cash Assistance ^e	1,091	502	40.1	(34.6-45.6)	
Pre-First Steps (FS) Medicaid Only ^f	1,210	634	46.4	(41.9-50.9)	
First Steps Expansion ⁹	770	387	40.5	(35.2-45.8)	
Non-Medicaid ^h	2,752	728	22.8	(20.6-25.0)	
Baby's Birth Weight (grams)					
Low Birth Weight (<2500 g)	331	132	33.7	(25.3-42.1)	
Normal Birth Weight (<u>></u> 2500 g)	5,494	2,119	30.7	(28.9-32.5)	
Site of Prenatal Care Visit					
Hospital Clinic	1,570	706	38.4	(34.5-42.3)	
Health Department Clinic	511	308	59.0	(51.9-66.1)	
Private Doctor's Office	2,696	735	22.9	(20.5-25.3)	
Military Facility	238	101	40.1	(29.7-50.5)	
Community or Migrant Health Center	248	133	51.6	(41.0-62.2)	
Other Clinic	519	248	40.8	(33.7-47.9)	

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; Medicaid status from linkage with Washington State First Steps Database; and prenatal care sites from PRAMS. Missing responses =195. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the maternal education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

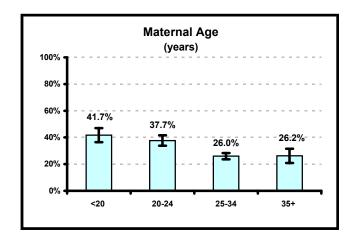
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

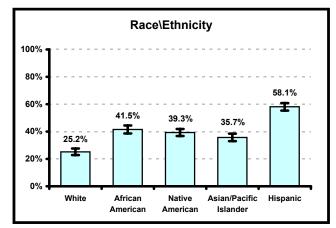
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups. poverty level,

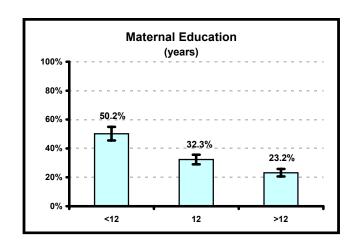
^hNon-Medicaid - women not enrolled in Medicaid.

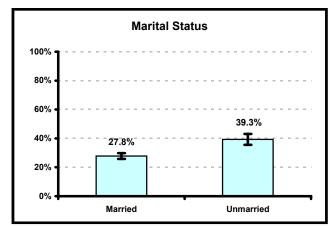
Figure 2.1: Women who reported a prenatal health care provider discussed physical abuse to women by their husbands or partners

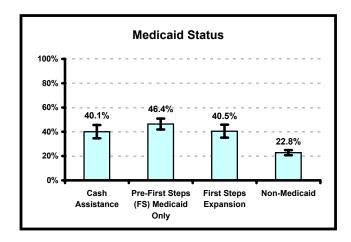
Washington State PRAMS 1996-1998











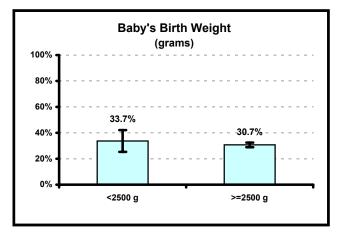
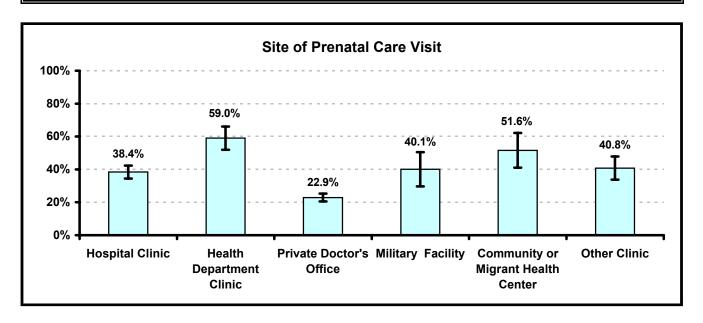


Figure 2.1 (cont'd): Women who reported a prenatal health care provider discussed physical abuse to women by their husbands or partners Washington State PRAMS 1996-1998



Survey Question #31:

During the 12 months before you got pregnant with your new baby, did any of these people physically abuse you? Check all that apply.

My husband or partner (4.2%)

A family or household member other than my husband or partner (1.3%)

A friend (0.4%)

Someone else (0.9%)

No one physically abused me during the 12 months before I got pregnant (91.4%)

Summary of Results:

Physical Abuse during the 12 Months before Pregnancy (Table 2.2 & Figure 2.2)

- ☐ Approximately 5.9% of the women said their husband or partner, a family or household member, a friend, or someone else physically abused them during the 12 months before becoming pregnant with their new baby. These women were more likely to be:
 - > Teenagers
 - Native American
 - Women with less than 12 years of education
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ Physical abuse during the 12 months before conception was not significantly associated with the infant's birth weights status.

Table 2.2: Women who reported being physically abused during the 12 months before they got pregnant with their new baby.

Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,852)	(n= 523)	(%= 5.9)	(4.9-6.9)
Maternal Age				
<20 years	979	161	15.5	(11.4-19.6)
20-24 years	1,504	181	8.9	(6.7-11.1)
25-34 years	2,805	151	2.3	(1.5-3.1)
35+ years	563	30	5.6	(2.7-8.5)
Race/Ethnicity				
White	1,371	63	4.9	(3.7-6.1)
African American	934	98	11.6	(9.4-13.8)
Native American	1,206	209	18.5	(16.5-20.5)
Asian/Pacific Islander	1,181	63	5.7	(4.3-7.1)
Hispanic	1,160	90	8.0	(6.4-9.6)
Maternal Education ^c				
<12 years	1,272	198	15.1	(11.4-18.8)
12 years	1,664	163	5.7	(4.1-7.3)
>12 years	2,277	97	2.6	(1.6-3.6)
Marital Status				
Married	3,754	182	2.9	(2.1-3.7)
Unmarried	2,087	336	13.8	(11.1-16.5)
Medicaid Status				
Medicaid ^d	3,082	438	11.8	(9.8-13.8)
Cash Assistance ^e	1,082	229	16.3	(12.2-20.4)
Pre-First Steps (FS) Medicaid Only ^f	1,229	148	10.7	(7.8-13.6)
First Steps Expansion ⁹	771	61	8.0	(4.7-11.3)
Non-Medicaid ^h	2,754	81	1.9	(1.1-2.7)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	345	44	7.2	(2.9-11.5)
Normal Birth Weight (>2500 g)	5,492	478	5.8	(4.8-6.8)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =182. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

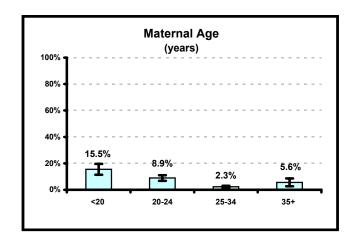
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

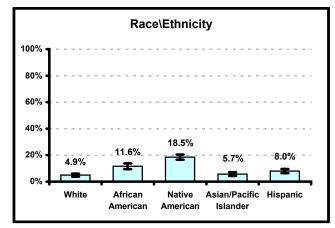
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

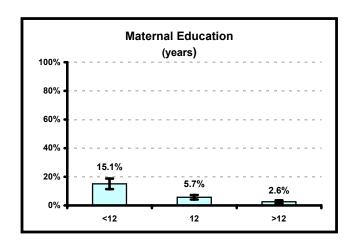
^hNon-Medicaid - women not enrolled in Medicaid.

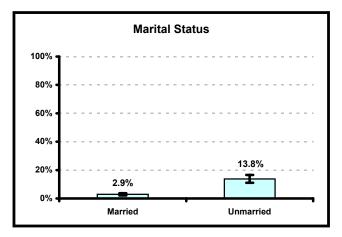
Figure 2.2: Women who reported being physically abused during the 12 months before they got pregnant with their new baby.

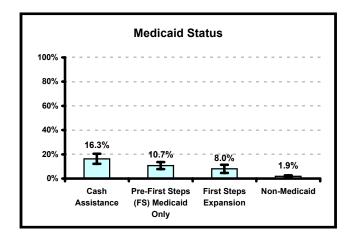
Washington State PRAMS 1996-1998

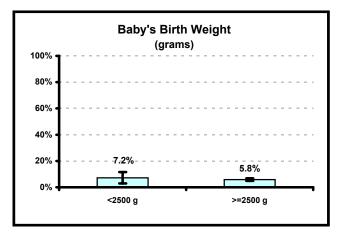












Survey Question #32:

During your most recent pregnancy, did any of these people physically abuse you? Check all that apply.

My husband or partner (3.1%)

A family or household member other than my husband or partner (0.7%)

A friend (0.2%)

Someone else (0.5%)

No one physically abused me during my pregnancy (94.5%)

Summary of Results:

Physical Abuse during the Most Recent Pregnancy (Table 2.3 & Figure 2.3)

- ☐ Four percent of women said their husband or partner, a family or household member, a friend, or someone else physically abused them during their most recent pregnancy. These women were more likely to be:
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ Teenagers (10.0%) were almost five times more likely to report being physically abused by their husband or partner, a family or household member, a friend, or someone else during their most recent pregnancy compared to women aged 35 years or older (2.1%).
- □ Native American women (12.2%) were more likely to report physical abuse by their husband or partner, a family or household member, a friend, or someone else during their most recent pregnancy than White women (3.2%).
- □ Women with less than a high school education (8.4%) were almost five times more likely to report being physically abused by their husband or partner, a family or household member, a friend, or someone else during their most recent pregnancy compared to women with more than a high school education (1.7%).
- ☐ The proportion of women who reported physical abuse by their husband or partner, a family or household member, a friend, or someone else during their most recent pregnancy did not significant differ by the infant's birth weight status.

Table 2.3: Women who reported being physically abused during their most recent pregnancy.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,924)	(n= 373)	(%= 4.0)	(3.2-4.8)
Maternal Age				
<20 years	999	115	10.0	(6.7-13.3)
20-24 years	1,526	140	7.3	(5.1-9.5)
25-34 years	2,828	101	1.5	(0.9-2.1)
35+ years	570	17	2.1	(0.3-3.9)
Race/Ethnicity				
White	1,392	42	3.2	(2.2-4.2)
African American	945	81	9.1	(7.3-10.9)
Native American	1,233	141	12.2	(10.6-13.8)
Asian/Pacific Islander	1,188	35	3.0	(2.0-4.0)
Hispanic	1,166	74	6.5	(5.1-7.9)
Maternal Education ^c				
<12 years	1,289	122	8.4	(5.7-11.1)
12 years	1,689	132	4.9	(3.3-6.5)
>12 years	2,299	72	1.7	(0.9-2.5)
Marital Status				
Married	3,787	132	2.1	(1.5-2.7)
Unmarried	2,126	239	9.1	(6.9-11.3)
Medicaid Status				
Medicaid ^d	3,127	315	8.2	(6.6-9.8)
Cash Assistance ^e	1,104	172	13.2	(9.5-16.9)
Pre-First Steps (FS) Medicaid Only ^f	1,242	101	7.0	(4.6-9.4)
First Steps Expansion ^g	781	42	4.0	(1.8-6.2)
Non-Medicaid ^h	2,781	56	1.3	(0.7-1.9)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	345	30	4.3	(1.4-7.2)
Normal Birth Weight (<u>></u> 2500 g)	5,564	343	4.0	(3.2-4.8)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =110. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

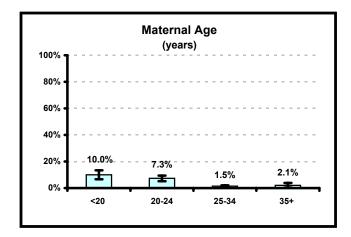
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

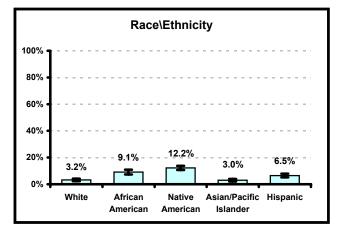
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

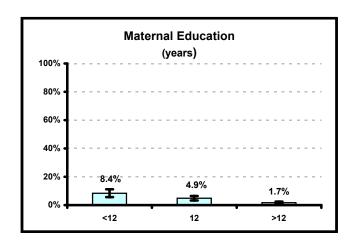
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

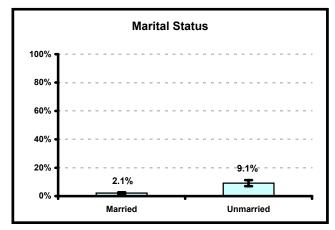
ⁿNon-Medicaid - women not enrolled in Medicaid.

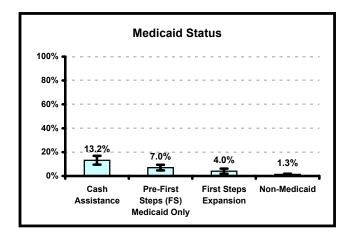
Figure 2.3: Women who reported being physically abused during their most recent pregnancy.

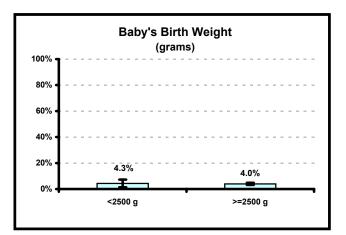












Survey Question #33:

During your most recent pregnancy, would you say that you were physically abused more often, less often, or about the same compared with 12 months before you got pregnant? Check only one.

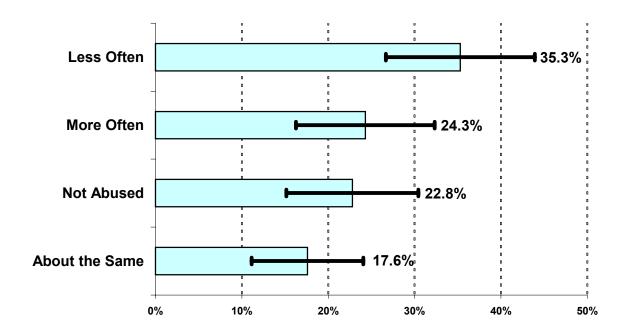
I was physically abused *more often* during my pregnancy (24.3%)

I was physically abused *less often* during my pregnancy (35.3%)

I was physically abused *about the same* during my pregnancy (17.6%)

No one physically abused me during the *12 months before* I got pregnant (22.8%)

Figure 2.4: Women Who Reported Physical Abuse during their Most Recent Pregnancy



Summary of Results:

The proportion of women who reported being physically abused less often (35.3%) during their most recent pregnancy compared to the 12 months prior to their pregnancy was significantly higher than those who reported being physically abused about the same during their most recent pregnancy (17.6%) compared to the 12 months prior to their pregnancy.

Table 2.5: Women who reported being physically abused more often during their most recent pregnancy compared with the 12 months before they became pregnant.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 402)	(n= 89)	(%= 24.3)	(16.3-32.3)
Maternal Age				
<20 years	122	28	28.5	(13.2-43.8)
20-24 years	146	32	22.8	(10.6-35.0)
25-34 years	116	26	21.7	(6.6-36.8)
35+ years*	18	-	-	(-12.5-58.5)
Race/Ethnicity				
White§	47	11	24.5	(12.0-37.0)
African American	92	17	17.0	(9.9-24.1)
Native American	146	29	19.6	(13.9-25.3)
Asian/Pacific Islander§	37	7	20.0	(7.3-32.7)
Hispanic	80	25	29.6	(19.8-39.4)
Maternal Education ^c				
<12 years	123	20	14.6	(3.4-25.8)
12 years	142	38	26.6	(13.9-39.3)
>12 years	88	21	29.7	(10.7-48.7)
Marital Status				
Married	145	30	22.9	(10.9-34.9)
Unmarried	255	59	25.5	(14.7-36.3)
Medicaid Status				
Medicaid ^d	328	72	24.2	(15.2-33.2)
Cash Assistance ^e	177	43	33.8	(18.9-48.7)
Pre-First Steps (FS) Medicaid Onlyf	104	22	17.2	(5.8-28.6)
First Steps Expansiong [§]	47	7	9.7	(0.7-18.7)
Non-Medicaid ^h	72	16	24.7	(8.0-41.4)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)§	33	8	32.5	(0.0-65.0)
Normal Birth Weight (≥2500 g)	369	81	23.7	(15.5-31.9)

^{*}Fewer than 30 respondents, not reported.

[§]Fewer than 60 respondents, may not be reliable.

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =5632. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

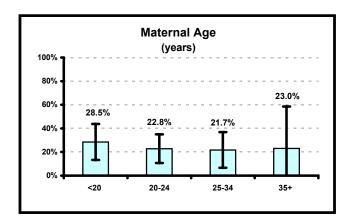
 $^{^{\}mathrm{e}}$ Cash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

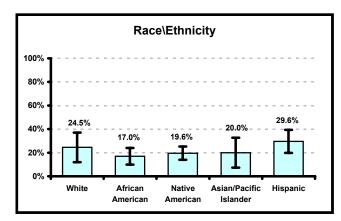
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

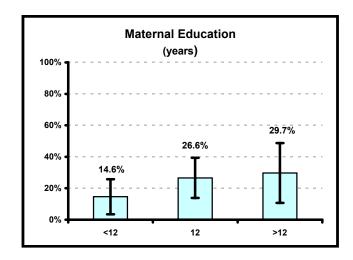
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

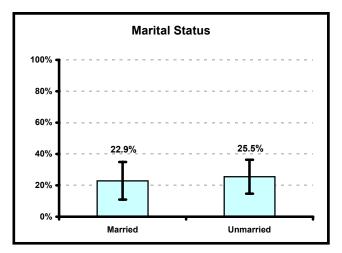
^hNon-Medicaid - women not enrolled in Medicaid.

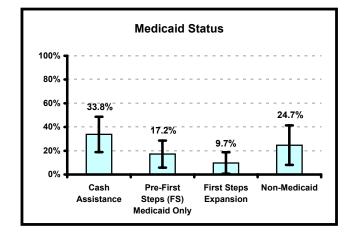
Figure 2.5: Women who reported being physically abused more often during their most recent pregnancy compared with the 12 months before they became pregnant.

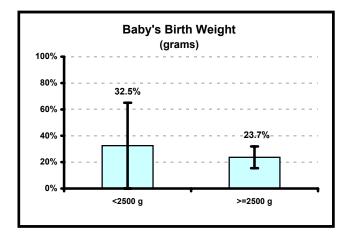












INFANT SAFETY

WASHINGTON STATE PRAMS 1996-1998



Infant Safety

Injury fatalities are a leading cause of childhood mortality in the United States, accounting for approximately 3% of deaths in the first year of life. In 1999 alone, nearly 6,000 United States children died from unintentional injuries, and each year more than 14 million children are injured seriously enough to require medical attention. The 1996-1998 PRAMS Surveillance report focuses on the following infant safety concerns in the home:

Working smoke alarm

Working smoke alarms can be highly effective in preventing fire-related deaths and injury by providing residents with sufficient warning to escape. If a fire occurs, the chances of dying in a residential fire are cut in half when a smoke alarm is present.³

Fires are the second leading cause of unintentional injury death among children. Children aged 4 years and under have a fire death rate more than twice the national average when compared to the total population. Approximately 800 children in the US ages 14 years and under die by fire each year, and 65 percent of these children are under age 5 years. Nearly 40,000 children ages 14 and under are injured by fires in the home. Children are disproportionately affected because they are too young to react appropriately to a fire, and tend to sustain more severe burns at lower temperatures than adults. Two-thirds of fire-related deaths and injuries among children under age 5 years occur in homes without working smoke alarms.

The Healthy People 2010 goal is to increase the total population living in residences with functioning smoke alarm on every floor to 100 percent.

Hot Water heater set at 120 degrees or below

Burn injuries from scalding (caused by hot liquids or steam) are the most common type of burn-related injury among young children. In 1999, an estimated 99,500 children ages 14 and under were treated in hospital emergency rooms for burn-related injuries; of these injuries, 23,620 were scald burns.⁶

Young children's skin burns at lower temperatures than older children and adults. Because of this, a young child exposed to 140 degree Fahrenheit tap water for three seconds will sustain a third-degree burn, an injury requiring hospitalization and skin grafts. Tap-water burns most often occur in the bathroom and tend to be more severe and cover a larger portion of the body than other scald burns.⁶

It is estimated that more than 75 percent of all scald burn injuries among young children, ages 2 and under could be prevented. Hot tap water scalds can be prevented by lowering the setting on water heater thermostats to 120 degrees Fahrenheit or below, and by installing anti-scald devices in water faucets and shower-heads.⁶

Car safety seat

When correctly used and installed, child safety seats are extremely effective in reducing injury and death of infants and children. The use of these seats reduces the risk of death by 71 percent for infants and by 54 percent for children ages one to four. The proper use of child safety seats also decreases the need for hospitalization by 69 percent for children under age five. ⁷

Approximately 29 percent of children ages 4 and under ride unrestrained, placing them at twice the risk of death and injury of those riding restrained.⁷

It is estimated that nationally in 1999 more than 300 deaths to children under age five were prevented as a result of child restraint use. If all child passengers under age five were in child safety seats, it is estimated that an additional 162 lives could be saved and 20,000 injuries could be prevented annually.⁷

Every child safety seat saves \$85 in direct medical costs and an additional \$1,275 in other costs. The Healthy People 2010 goal is to increase the use of child restrains to 100 percent.

Firearms in the home

In 1999, 88 children died from unintentional firearm-related injuries, while another estimated 1,800 children ages 14 and under received treatment in hospital emergency rooms nationals from unintentional firearm-related injuries.⁹

Most childhood unintentional shooting deaths occur in or around the home. Half occur in the home of the victim, and nearly 40 percent occur at a friend or relative's house. One in every four homes in the US holds a handgun. Most of these child deaths involve guns that have been stored loaded, are accessible to children, and occur when children are playing with the gun. One recent study of parents of children ages four to twelve found that more than half of the parents reported storing a firearm loaded or unlocked in their home.

Safe gun storage laws are effective in reducing unintentional firearm-related deaths among children an average of 23 percent. Some states which have these laws hold adults criminally liable for failing either to use trigger locks or to store loaded firearms in a location inaccessible to children. The use of two safety devices, gun locks and load indicators, could prevent more than 30 percent of all unintentional firearm deaths, including every incident in which a child age five and under shot and killed himself or another person.

The Healthy People 2010 goal is to reduce the proportion of persons living in homes with firearms that are loaded and unlocked to 16 percent, down from the baseline of 19 percent of the population who lived in homes with loaded and unlocked firearms in.

References:

¹ Stevens-Simmons C. Recent development in adolescent pregnancy. Curv. Prob. Pediatr. 1992;8:295-301.

² National Safe Kids Campaign. Safety Tips (Unintentional). Washington DC, 2002.

³ Hall, J.R. The U.S. Fire Problem and Overview Report. Leading causes and other patterns and trends. Quincy, MA: NFPA.

⁴ National Safe Kids Campaign. *Injury Facts: Fire Injury (Residential)*. Washington DC, 2002.

⁵ Hall, J.R. The U.S. Fire Problem and Overview Report. Leading causes and other patterns and trends. Quincy, MA: NFPA.

⁶ National Safe Kids Campaign. *Injury Facts: Burn Injury*. Washington DC, 2002.

⁷ National Safe Kids Campaign. *Injury Facts: Motor Vehicle Occupant Injury*. Washington DC, 2002.

⁸ National Safety Council. *Accident Facts*. 1995.

⁹ National Safe Kids Campaign. *Injury Facts: Firearm Injury (Unintentional)*. Washington DC, 2002.

Survey Question #16:

During any of your prenatal care visits, did a doctor, nurse, or other health care worker talk with you about any of the things listed below? For each thing, please circle Y (Yes) if someone talked with you about it or N (No) if no one talked with you about it.

e. Using a seat belt during your pregnancy

No (39.3%)

Yes (60.7%)

Summary of Results:

Prenatal Health Care Provider Discussion of Seat Belt Use during Pregnancy (Table 3.1 & Figure 3.1)

- Over half (60.7%) of the PRAMS respondents said a prenatal health care provider talked with them about using a seat belt during their pregnancy. These women were more likely to be:
 - Hispanic
 - Medicaid recipients (specifically Pre-First Steps Medicaid Only)
- □ Women who had less than a high school education (68.4%) were significantly more likely to report a prenatal health care provider discussed with them about using a seat belt during their pregnancy compared to those with more than a high school education (56.6%).
- Approximately 70.4 percent of women receiving prenatal care at a health department clinic said a prenatal health care provider talked with them about using a seat belt during their pregnancy. This proportion was significantly higher than what was reported by women who received prenatal care services at a private doctor's office (55.9%).
- ☐ There were no significant differences among the following maternal characteristics for women reporting that a prenatal health care provider discussed seat belt use during their pregnancy: maternal age, marital status, and the infant's birth weight status.

Table 3.1: Women who reported a prenatal health care provider discussed seatbelt use during pregnancy

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,872)	(n= 3,835)	(%= 60.7)	(58.7-62.7)
Maternal Age				
<20 years	985	685	64.0	(58.5-69.5)
20-24 years	1,521	1,050	64.4	(60.3-68.5)
25-34 years	2,807	1,773	59.3	(56.6-62.0)
35+ years	558	327	55.6	(49.3-61.9)
Race/Ethnicity				
White	1,397	803	57.2	(54.7-59.7)
African American	941	630	66.7	(63.8-69.6)
Native American	1,216	755	62.2	(59.8-64.6)
Asian/Pacific Islander	1,154	749	65.5	(62.8-68.2)
Hispanic	1,164	898	77.4	(75.0-79.8)
Maternal Education ^c				
<12 years	1,275	936	68.4	(63.7-73.1)
12 years	1,667	1,104	62.5	(58.8-66.2)
>12 years	2,301	1,378	56.6	(53.5-59.7)
Marital Status				
Married	3,766	2,434	60.3	(57.9-62.7)
Unmarried	2,097	1,396	61.8	(58.1-65.5)
Medicaid Status				
Medicaid ^d	3,089	2,151	65.7	(62.8-68.6)
Cash Assistance ^e	1,096	714	61.7	(56.2-67.2)
Pre-First Steps (FS) Medicaid Only ^f	1,220	885	69.8	(65.3-74.3)
First Steps Expansion ⁹	773	552	64.3	(58.6-70.0)
Non-Medicaid ^h	2,767	1,679	57.5	(54.8-60.2)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	333	217	64.1	(55.1-73.1)
Normal Birth Weight (<u>></u> 2500 g)	5,525	3,606	60.5	(58.5-62.5)
Site of Prenatal Care Visit				
Hospital Clinic	1,578	1,126	68.8	(64.9-72.7)
Health Department Clinic	513	375	70.4	(63.7-77.1)
Private Doctor's Office	2,712	1,604	55.9	(53.2-58.6)
Military Facility	239	160	64.6	(54.2-75.0)
Community or Migrant Health Center	252	181	72.1	(62.5-81.7)
Other Clinic	520	353	63.0	(55.9-70.1)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; Medicaid status from linkage with Washington State First Steps Database; and prenatal care sites from PRAMS.

Missing responses =162. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831). ^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

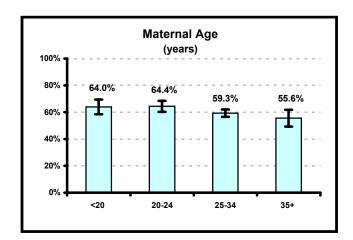
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

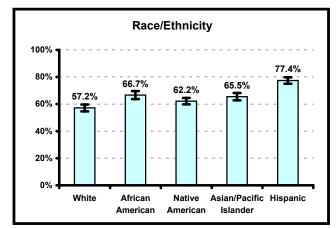
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

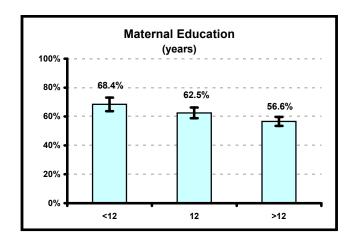
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

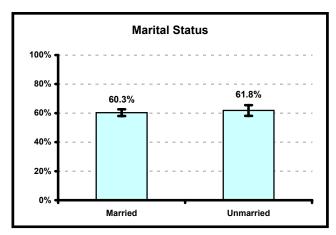
^hNon-Medicaid - women not enrolled in Medicaid.

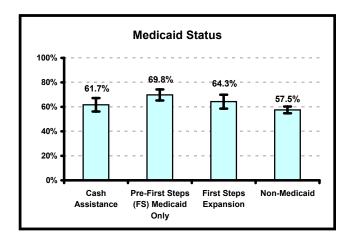
Figure 3.1: Women who reported a prenatal health care provider discussed seatbelt use during pregnancy











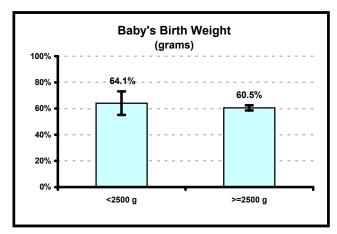
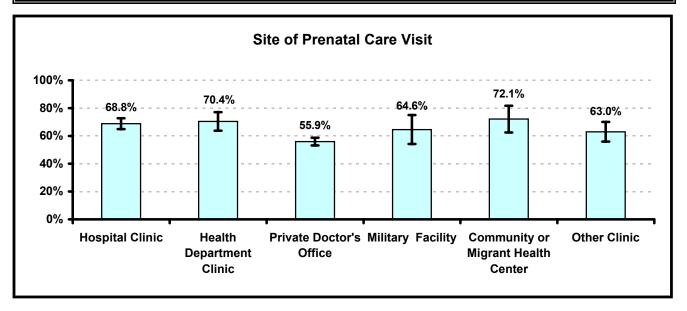


Figure 3.1 (cont'd): Women who reported a prenatal health care provider discussed seatbelt use during pregnancy



Survey Question #65:

List below are some statements about safety. For each thing, circle Y (Yes) if it applied to you, N (No) if it does not apply to you, or DK (don't' know) if you are unsure.

a. My home has a working smoke alarm that has been tested in the past year.

No (7.1%)

Yes (92.9%)

Summary of Results:

Working Smoke Alarm in the House (Table 3.2 & Figure 3.2)

- ☐ Approximately 92.9 percent of women said they had a working smoke alarm that was tested in the past year. These women were more likely to be:
 - White
 - Married
 - Non-Medicaid recipients
- ☐ White women (94.6%) were more likely to report having a working smoke alarm that been tested in the past year compared to Hispanic women (82.9%) and Native American women (88.4%).
- □ Women with more than a high school education (95.3%) were significantly more likely to report they had a working smoke alarm that had been tested in the past year compared to those with less than high school education (87.7%).
- ☐ The infant's birth weight status was not significantly associated with women's report of having a working smoke alarm that had been tested in the past year.

Table 3.2: Women who reported their home has a working smoke alarm that has been tested in the past year

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,568)	(n= 5,041)	(%= 92.9)	(91.9 - 93.9)
Maternal Age				
<20 years	915	805	90.4	(87.3 - 93.5)
20-24 years	1,418	1,263	91.6	(89.4 - 93.8)
25-34 years	2,701	2,478	93.6	(92.2 - 95.0)
35+ years	534	495	94.9	(92.4 - 97.4)
Race/Ethnicity				
White	1,353	1,280	94.6	(93.4 - 95.8)
African American	892	834	93.5	(91.9 - 95.1)
Native American	1,156	1,023	88.4	(86.8 - 90.0)
Asian/Pacific Islander	1,086	1,003	92.1	(90.5 - 93.7)
Hispanic	1,081	901	82.9	(80.7 - 85.1)
Maternal Education ^c				
<12 years	1,179	1,002	87.7	(85.0 - 90.4)
12 years	1,584	1,444	92.5	(90.5 - 94.5)
>12 years	2,216	2,077	95.3	(94.1 - 96.5)
Marital Status				
Married	3,572	3,286	93.8	(92.6 - 95.0)
Unmarried	1,985	1,744	90.3	(88.1 - 92.5)
Medicaid Status				
Medicaid ^d	2,897	2,531	89.5	(87.7 - 91.3)
Cash Assistance ^e	1,029	919	91.4	(88.5 - 94.3)
Pre-First Steps (FS) Medicaid Onlyf	1,135	964	86.6	(83.7 - 89.5)
First Steps Expansion ⁹	733	648	91.6	(89.1 - 94.1)
Non-Medicaid ^h	2,670	2,509	95.0	(93.8 - 96.2)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	297	273	92.3	(87.0 - 97.6)
Normal Birth Weight (>2500 g)	5,260	4,757	92.9	(91.9 - 93.9)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =466. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

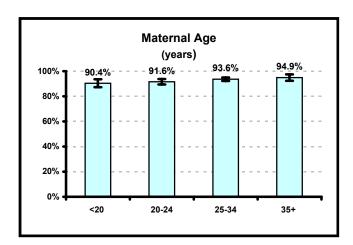
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

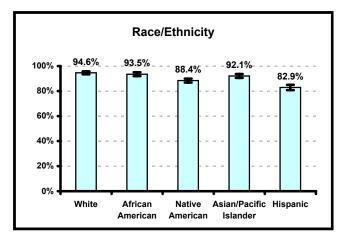
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

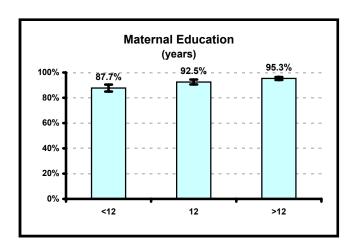
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

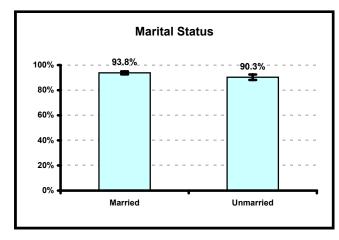
ⁿNon-Medicaid - women not enrolled in Medicaid.

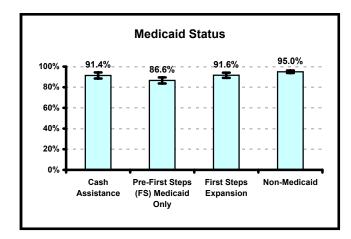
Figure 3.2: Women who reported their home has a working smoke alarm that has been tested in the past year.

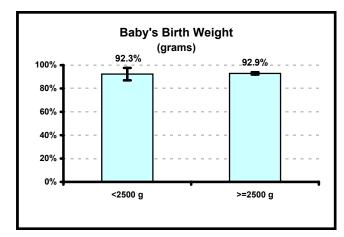












Survey Question #65:

List below are some statements about safety. For each thing, circle Y (Yes) if it applied to you, N (No) if it does not apply to you, or DK (don't' know) if you are unsure.

b. My hot water heater has been turned down or set to 120°F or below.

No (17.2%)

Yes (82.8%)

Summary of Results:

Hot Water Heater Set at 120°F or Below (Table 3.3 & Figure 3.3)

- ☐ Approximately 82.8 percent of women said they had turn down their hot water heater to 120°F or below. These women were more likely to be:
 - > Cash Assistance recipients
- ☐ African American women (85.5%) were significantly more likely to report they had turn down their hot water heater to 120°F or below.
- ☐ There was no significant association between women who had reported their water heater had been turned down to 120°F or below and maternal age, maternal education, marital status, or the infant's birth weight status.

Table 3.3: Women who reported their hot water heater has been turned down or set to 120 degrees F or below

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 3,801)	(n= 3,114)	(%= 82.8)	(81.0 - 84.6)
Maternal Age				
<20 years	538	430	86.3	(82.0 - 90.6)
20-24 years	933	757	83.7	(80.0 - 87.4)
25-34 years	1,920	1,580	82.3	(79.8 - 84.8)
35+ years	410	347	80.3	(74.4 - 86.2)
Race/Ethnicity				
White	1,000	837	83.8	(81.4 - 86.2)
African American	613	524	85.5	(82.8 - 88.2)
Native American	807	671	83.5	(81.1 - 85.9)
Asian/Pacific Islander	747	610	81.9	(79.2 - 84.6)
Hispanic	634	472	74.1	(70.8 - 77.4)
Maternal Education ^c				
<12 years	735	576	82.8	(78.9 - 86.7)
12 years	1,080	902	83.3	(79.8 - 86.8)
>12 years	1,582	1,304	82.9	(80.2 - 85.6)
Marital Status				
Married	2,527	2,080	82.4	(80.2 - 84.6)
Unmarried	1,271	1,033	84.2	(80.9 - 87.5)
Medicaid Status				
Medicaid ^d	1,852	1,504	83.3	(80.6 - 86.0)
Cash Assistance ^e	698	605	89.7	(85.6 - 93.8)
Pre-First Steps (FS) Medicaid Only ^f	688	524	81.1	(77.0 - 85.2)
First Steps Expansion ⁹	466	375	78.4	(72.3 - 84.5)
Non-Medicaid ^h	1,948	1,610	82.6	(80.2 - 85.0)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	195	164	84.2	(75.8 - 92.6)
Normal Birth Weight (<u>></u> 2500 g)	3,599	2,943	82.7	(80.7 - 84.7)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database. Missing responses =2233. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

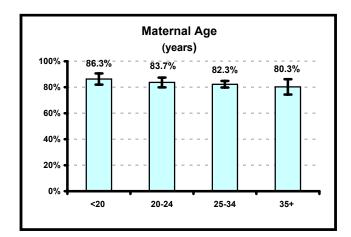
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

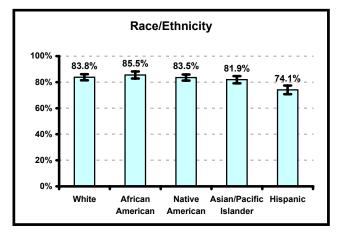
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

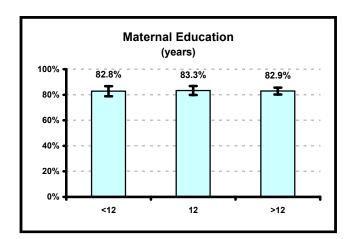
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

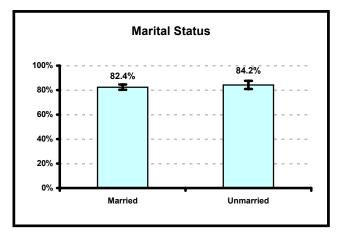
^hNon-Medicaid - women not enrolled in Medicaid.

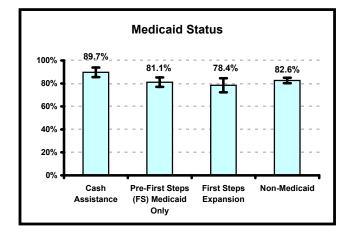
Figure 3.3: Women who reported their hot water heater has been turned down or set to 120 degrees F or below

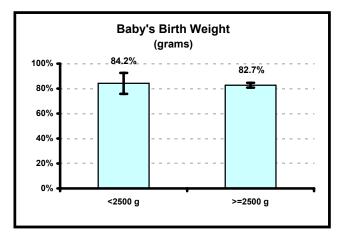












Survey Question #65:

List below are some statements about safety. For each thing, circle Y (Yes) if it applied to you, N (No) if it does not apply to you, or DK (don't know) if you are unsure.

c. The last time my baby rode in a car he or she was in a car safety seat.

No (0.8%)

Yes (99.2%)

Summary of Results:

Baby in a Car Safety Seat (Table 3.4 & Figure 3.4)

- ☐ Almost all (99.2%) of the women reported the last time their baby rode in a car he or she was in a car safety seat.
- ☐ There was no significant difference in the proportion of women who reported their baby was in a car safety seat the last time their baby rode in a car by maternal age, race/ethnicity, maternal education, marital status, Medicaid status, or the infant's birth weight status.

Table 3.4: Women who reported the last time their baby rode in a car he or she was in a car safety seat

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,805)	(n= 5,735)	(%= 99.2)	(98.8 - 99.6)
Maternal Age				
<20 years	977	969	99.5	(99.1 - 99.9)
20-24 years	1,496	1,477	99.0	(98.2 - 99.8)
25-34 years	2,774	2,737	99.2	(98.8 - 99.6)
35+ years	558	552	98.8	(97.4 - 100.2)
Race/Ethnicity				
White	1,379	1,371	99.4	(99.0 - 99.8)
African American	923	910	98.6	(97.8 - 99.4)
Native American	1,198	1,185	98.7	(98.1 - 99.3)
Asian/Pacific Islander	1,155	1,141	98.7	(98.1 - 99.3)
Hispanic	1,150	1,128	98.0	(97.2 - 98.8)
Maternal Education ^c				
<12 years	1,259	1,239	98.4	(97.4 - 99.4)
12 years	1,652	1,633	99.0	(98.2 - 99.8)
>12 years	2,270	2,251	99.5	(99.1 - 99.9)
Marital Status				
Married	3,711	3,673	99.2	(98.8 - 99.6)
Unmarried	2,083	2,051	99.0	(98.4 - 99.6)
Medicaid Status				
Medicaid ^d	3,065	3,013	98.7	(98.1 - 99.3)
Cash Assistance ^e	1,076	1,060	99.1	(98.3 - 99.9)
Pre-First Steps (FS) Medicaid Onlyf	1,214	1,189	98.6	(97.8 - 99.4)
First Steps Expansion ⁹	775	764	98.6	(97.2 - 100.0)
Non-Medicaid ^h	2,739	2,721	99.4	(99.0 - 99.8)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	318	315	98.7	(96.5 - 100.9)
Normal Birth Weight (<u>></u> 2500 g)	5,475	5,408	99.2	(98.8 - 99.6)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database. Missing responses =229. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

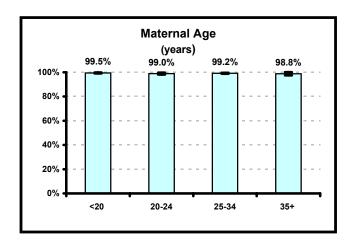
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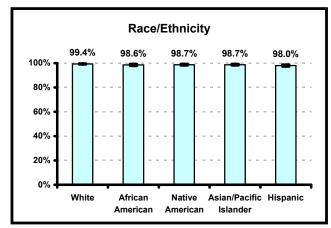
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid. ^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

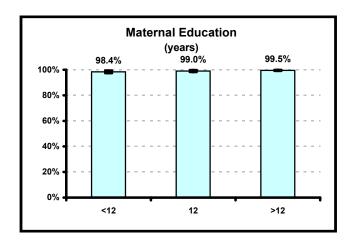
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

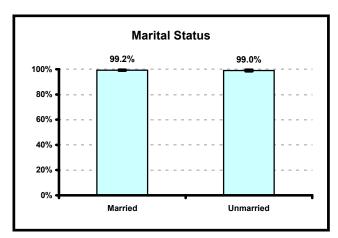
^hNon-Medicaid - women not enrolled in Medicaid.

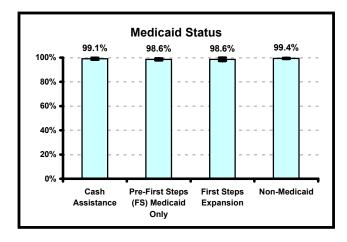
Figure 3.4: Women who reported the last time their baby rode in a car he or she was in a car safety seat

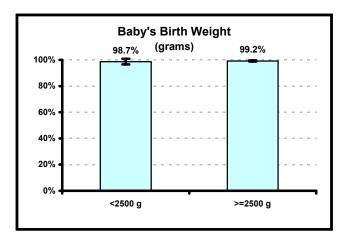












Survey Question #66:

a. Do you have any guns, rifles, or firearms in your home?

No (72.0%) Yes (28.0%)

I don't know (0.0%)

Summary of Results:

Firearms in the Home (Table 3.5 & Figure 3.5)

- ☐ Twenty-eight percent of women said there were guns, rifles, or firearms in the home. These women were more likely to be:
 - > White
 - ➤ Women with a high school education or more
 - Married
 - ➤ Non-Medicaid recipients
- ☐ Thirty-two percent of women aged 25 to 34 reported there were guns, rifles, or firearms in the home. This proportion was significantly higher than for women aged 20 to 24 (21.6%) and teenagers (22.4%).
- ☐ The proportion of women who reported they had guns, rifles, or firearms in their home did not differ by the infant's birth weight status.

Table 3.5: Women who reported having guns, rifles or firearms in their home.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,946)	(n= 1,191)	(%= 28)	(26.0 - 30.0)
Maternal Age				
<20 years	1,000	168	22.4	(17.5 - 27.3)
20-24 years	1,534	251	21.6	(18.1 - 25.1)
25-34 years	2,841	659	32.0	(29.3 - 34.7)
35+ years	570	113	29.1	(23.2 - 35.0)
Race/Ethnicity				
White	1,394	471	33.4	(30.9 - 35.9)
African American	954	100	9.8	(8.0 - 11.6)
Native American	1,236	347	26.7	(24.5 - 28.9)
Asian/Pacific Islander	1,186	176	14.5	(12.5 - 16.5)
Hispanic	1,176	97	7.9	(6.3 - 9.5)
Maternal Education ^c				
<12 years	1,296	155	16.3	(12.2 - 20.4)
12 years	1,698	384	32.9	(29.2 - 36.6)
>12 years	2,296	575	31.0	(28.1 - 33.9)
Marital Status				
Married	3,790	874	31.1	(28.7 - 33.5)
Unmarried	2,145	315	19.7	(16.6 - 22.8)
Medicaid Status				
Medicaid ^d	3,138	428	18.8	(16.3 - 21.3)
Cash Assistance ^e	1,111	110	10.9	(7.2 - 14.6)
Pre-First Steps (FS) Medicaid Onlyf	1,238	193	20.9	(16.8 - 25.0)
First Steps Expansion ⁹	789	125	25.1	(19.6 - 30.6)
Non-Medicaid ^h	2,792	760	34.2	(31.7 - 36.7)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	352	66	28.0	(19.4 - 36.6)
Normal Birth Weight (<u>></u> 2500 g)	5,579	1,122	28.0	(26.0 - 30.0)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =88. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps(FS) Medicaid Only, or First Steps Expansion.

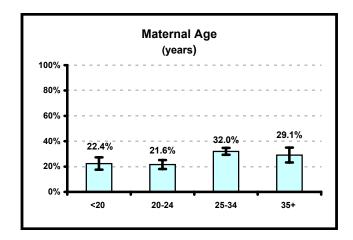
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

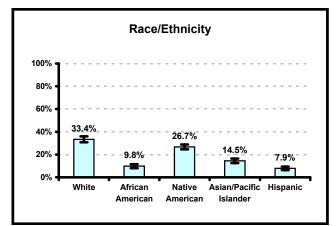
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

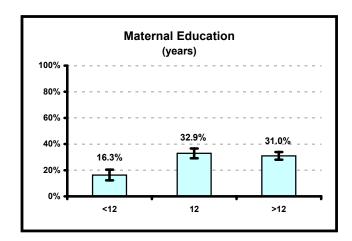
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

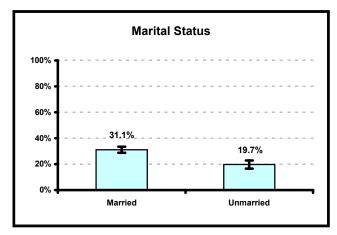
^hNon-Medicaid - women not enrolled in Medicaid.

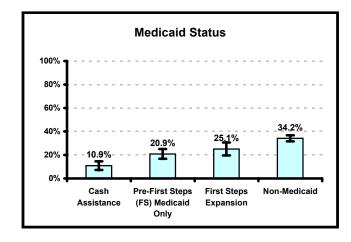
Figure 3.5: Women who reported having guns, rifles or firearms in their home. Washington State PRAMS 1996-1998

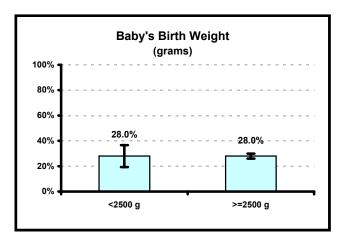












Survey Question #66:

b. Are any of these guns kept loaded?

No (82.3%)

Yes (17.7%)

I don't know (0.0%)

Summary of Results:

Loaded Guns in the Home (Table 3.6 & Figure 3.6)

- ☐ Among the women who said they had firearms in their home (28.0%), approximately 17.7 percent of them said they were loaded. These women were more likely to be:
 - ➤ Non-Medicaid recipients
- ☐ African American women (24.5%) were two times more likely to report having loaded firearms in their home than Native American women (10.6%).
- ☐ There was no association between women's report of having loaded firearms in their home and the infant's birth weight status.

Table 3.6: Women who reported having loaded guns, rifles or firearms in their home.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 1,151)	(n= 183)	(%= 17.7)	(14.6 - 20.8)
Maternal Age				
<20 years	157	21	14.3	(5.3 - 23.3)
20-24 years	240	32	15.5	(8.2 - 22.8)
25-34 years	642	116	19.6	(15.5 - 23.7)
35+ years	112	14	13.8	(5.2 - 22.4)
Race/Ethnicity				
White	464	84	18.0	(14.5 - 21.5)
African American	93	23	24.5	(16.3 - 32.7)
Native American	338	39	10.6	(7.9 - 13.3)
Asian/Pacific Islander	163	27	16.9	(11.2 - 22.6)
Hispanic	93	10	10.9	(4.6 - 17.2)
Maternal Education ^c				
<12 years	145	15	11.0	(1.8 - 20.2)
12 years	374	43	16.2	(10.9 - 21.5)
>12 years	560	105	19.3	(14.8 - 23.8)
Marital Status				
Married	854	139	17.5	(14.0 - 21.0)
Unmarried	296	44	18.6	(11.0 - 26.2)
Medicaid Status				
Medicaid ^d	405	50	10.7	(5.8 - 15.6)
Cash Assistance ^e	106	19	4.3	(1.4 - 7.2)
Pre-First Steps (FS) Medicaid Only ^f	177	20	11.5	(3.5 - 19.5)
First Steps Expansion ⁹	122	11	13.1	(4.1 - 22.1)
Non-Medicaid ^h	744	133	20.2	(16.3 - 24.1)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	64	14	23.8	(7.5 - 40.1)
Normal Birth Weight (≥2500 g)	1,084	169	17.4	(14.3 - 20.5)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database. Missing responses =4883. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

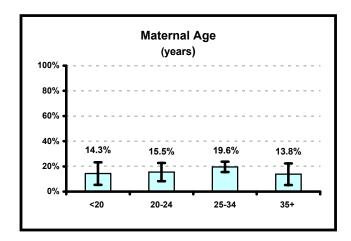
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

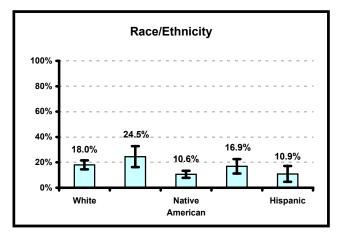
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eliqible for cash assistance.

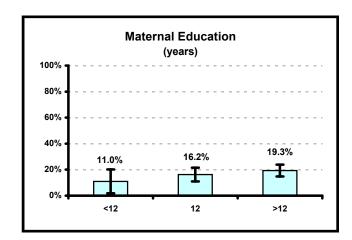
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

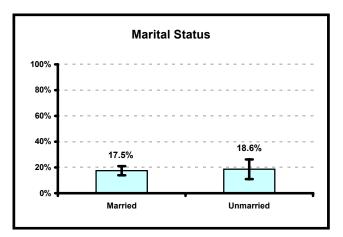
^hNon-Medicaid - women not enrolled in Medicaid.

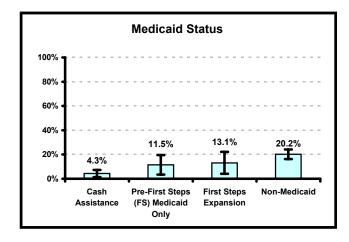
Figure 3.6: Women who reported having loaded guns, rifles or firearms in their home.

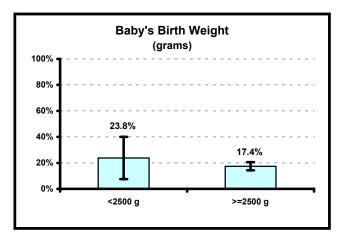












Survey Question #66:

c. Are all of these guns stored in locked cabinets and storage areas?

No (82.3%)

Yes (17.7%)

I don't know (0.0%)

Summary of Results:

Guns Stored in Locked Storage Areas (Table 3.7 & Figure 3.7)

- ☐ Among the women who said they had firearms in their home (28.0%), over half (58.4%) of them said they were stored in locked cabinets and storage areas. These women were more likely to be:
 - ➤ Women with less than a high school education
 - Unmarried
 - ➤ Medicaid recipients (especially Cash Assistance)
- ☐ Teenagers (81.9%) were significantly more likely to report their firearms were stored in locked storage areas compared to women aged 25 to 34 (52.1%) and women aged 35 years or older (59.0%).
- ☐ Asian/Pacific Islander women (74.9%) were significantly more likely to report their firearms were stored in locked storage areas compared to White women (57.2%).
- □ Women who reported their firearms were locked in cabinets and storage areas did not differ between those who delivered a low birth weight infant (<2500 grams) and those who delivered a normal weight infant (≥2500 grams).

Table 3.7: Women who reported that their guns are stored in locked cabinets and storage areas.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 1,152)	(n= 738)	(%= 58.4)	(54.3 - 62.5)
Maternal Age				
<20 years	159	127	81.9	(72.1 - 91.7)
20-24 years	238	174	65.5	(56.1 - 74.9)
25-34 years	644	369	52.1	(46.8 - 57.4)
35+ years	111	68	59.0	(46.8 - 71.2)
Race/Ethnicity				
White	463	263	57.2	(52.7 - 61.7)
African American	96	67	69.2	(60.2 - 78.2)
Native American	332	228	70.5	(66.2 - 74.8)
Asian/Pacific Islander	166	122	74.9	(68.6 - 81.2)
Hispanic	95	58	61.6	(52.0 - 71.2)
Maternal Education ^c				
<12 years	145	122	83.7	(73.1 - 94.3)
12 years	372	255	63.3	(56.4 - 70.2)
>12 years	561	320	51.9	(46.2 - 57.6)
Marital Status				
Married	854	511	54.8	(50.3 - 59.3)
Unmarried	297	226	73.6	(65.2 - 82.0)
Medicaid Status				
Medicaid ^d	407	296	67.9	(60.3 - 75.5)
Cash Assistance ^e	107	90	80.7	(65.8 - 95.6)
Pre-First Steps (FS) Medicaid Only ^f	180	127	73.5	(63.1 - 83.9)
First Steps Expansion ⁹	120	79	54.4	(40.9 - 67.9)
Non-Medicaid ^h	742	440	54.9	(50.2 - 59.6)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	64	47	72.8	(55.9 - 89.7)
Normal Birth Weight (<u>></u> 2500 g)	1,085	690	57.6	(53.5 - 61.7)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

 $birth\ certificates;\ and\ Medicaid\ status\ from\ linkage\ with\ Washington\ State\ First\ Steps\ Database.$

Missing responses =4882. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

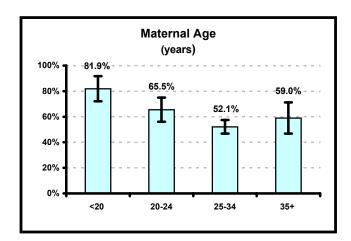
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

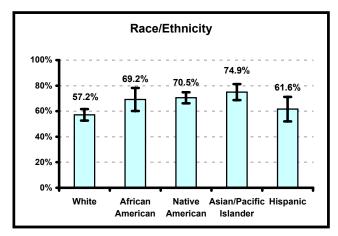
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

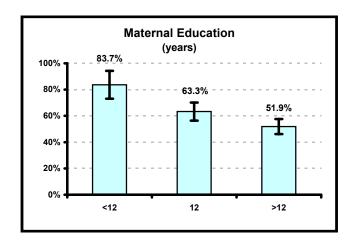
^gFirst Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

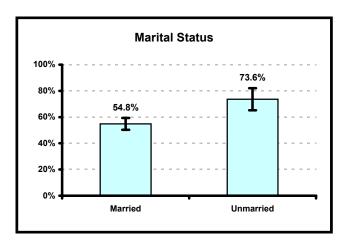
^hNon-Medicaid - women not enrolled in Medicaid.

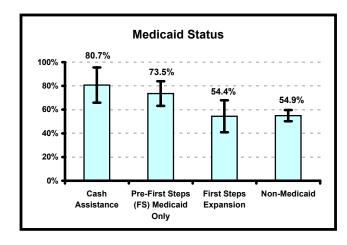
Figure 3.7: Women who reported that their guns are stored in locked cabinets and storage areas.

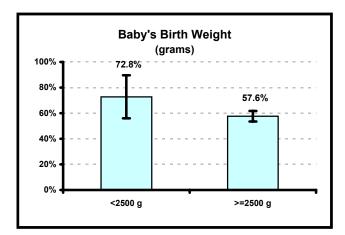












Survey Question #66:

d. Are there trigger locks on these guns?

No (48.8%)

Yes (51.2%)

I don't know (0.0%)

Summary of Results:

Trigger Locks on Guns in the Home (Table 3.8 & Figure 3.8)

- ☐ Among the women who said they had firearms in their home (28.0%), an estimated 51.2 percent of them reported there were trigger locks on the guns. These women were more likely to be:
 - > Teenagers
 - ➤ Women with less than a high school education
 - ➤ Unmarried
- ☐ Hispanic women (67.4%) were significantly more likely to report the firearms in their home had trigger locks compared to White women (50.0%).
- ☐ Women's report of having firearms with trigger locks in their home was not significantly associated with Medicaid status or the infant's birth weight status.

Table 3.8: Women who reported having trigger locks on the guns in their home.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 1,008)	(n= 573)	(%= 51.2)	(46.9 - 55.5)
Maternal Age				
<20 years	131	100	77.1	(65.1 - 89.1)
20-24 years	215	133	51.1	(40.9 - 61.3)
25-34 years	577	297	48.3	(42.8 - 53.8)
35+ years	85	43	42.2	(28.3 - 56.1)
Race/Ethnicity				
White	412	205	50.0	(45.1 - 54.9)
African American	85	53	63.6	(54.0 - 73.2)
Native American	292	183	64.0	(59.1 - 68.9)
Asian/Pacific Islander	137	78	57.7	(49.7 - 65.7)
Hispanic	82	54	67.4	(57.6 - 77.2)
Maternal Education ^c				
<12 years	124	93	73.2	(59.5 - 86.9)
12 years	330	189	48.9	(41.5 - 56.3)
>12 years	491	252	47.9	(41.8 - 54.0)
Marital Status				
Married	758	396	48.5	(43.6 - 53.4)
Unmarried	249	177	63.5	(53.5 - 73.5)
Medicaid Status				
Medicaid ^d	355	235	60.9	(52.5 - 69.3)
Cash Assistance ^e	88	61	68.6	(50.6 - 86.6)
Pre-First Steps (FS) Medicaid Onlyf	166	107	62.6	(50.4 - 74.8)
First Steps Expansion ⁹	101	67	54.0	(39.3 - 68.7)
Non-Medicaid ^h	652	337	47.7	(42.6 - 52.8)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g) ^l	57	36	55.5	(35.3 - 75.7)
Normal Birth Weight (<a>2500 g)	948	535	51.0	(46.5 - 55.5)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

Missing responses =5026. CI = Confidence Interval. White includes other/unknown (3.5%).

birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

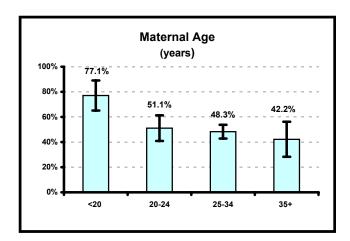
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

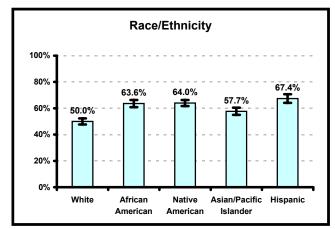
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

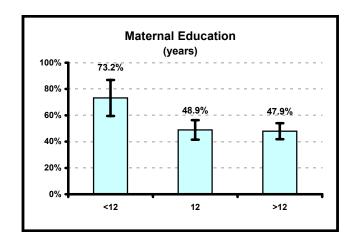
^hNon-Medicaid - women not enrolled in Medicaid.

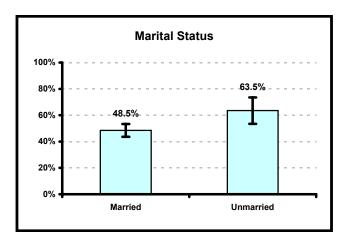
<60 respondents, may not be reliable.</p>

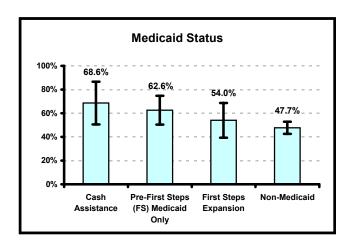
Figure 3.8: Women who reported having trigger locks on the guns in their home.

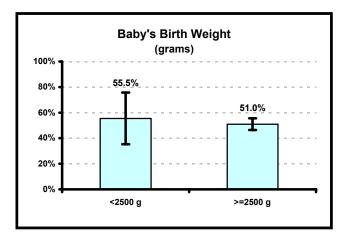












INFANT SLEEP POSITION

WASHINGTON STATE PRAMS 1996-1998



Infant Sleeping Position

Placing an infant on the back to sleep has shown to be a behavior that can decrease the risk of sudden infant death syndrome (SIDS).¹ SIDS is the diagnosis given for the sudden death of an infant less than 1 year of age that remains unexplained after a complete investigation of the deceased infant's medical history, physical condition and living environment.²

The risk of SIDS peaks at 2 to 4 months of age, and approximately 90% of SIDS cases occur in children less than 6 months of age.³ In the United States, the incidence of SIDS is highest during the winter months, and among American Indian or black infants, male infants, and infants weighing less than 2500 grams at birth.^{3,4,5} Maternal risk factors associated with SIDS deaths include young age, not completing high school, use of tobacco or illicit drugs during pregnancy, low income, and late entry into or no prenatal care.⁶

The etiology and pathogenesis of SIDS are unknown. Nevertheless, multiple studies over several years report increased risk (relative risk or odds ratio) of SIDS ranging from 3.5 to 9.3 when an infant is placed in a prone position (on stomach) compared with other positions. Researchers postulate that a prone sleep position may cause airway obstruction or a thermal imbalance or may interfere with arousal if the airway is obstructed. Although sleep position alone will not eliminate SIDS, these study findings have prompted the medical community to encourage mothers to avoid placing their infants in a prone position unless medically warranted. In 1994, the Centers for Disease Control and Prevention launched a nationwide "Back to Sleep" campaign to encourage mothers to place their newborns in a supine position (on the back) to sleep.

Since the implementation of the 1994 "Back to Sleep" campaign, the percentage of prone placement declined from 43% in 1994 to 17% in 1998 and supine placement increased from 27% in 1994 to 56% in 1998, according to a national household survey. Despite the improvement in healthy sleep position placement, mothers who are black, are young, have a household income below the poverty level, live in the South or mid-Atlantic regions of the United States, or have more than one child are significantly less likely to place their infants in a supine sleeping position and more likely to continue placing their infants in a prone position to sleep. 9, 10, 11

Identifying populations at risk of using prone placement helps states to target their prevention efforts and guides states toward achieving the *Healthy People 2010* objective to increase the percentage of healthy full-term infants who are put down to sleep on their backs to 70%. ¹²

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¹² U.S. Department of Health and Human Services. <u>Healthy people 2010</u> (Conference edition, in two volumes). Washington, DC: January 2000.

Survey Question #45:

How do you put your new baby down to sleep *most* of the time? Check one answer.

On his or her back (54.2%)

On his or her side (33.6%)

On his or her stomach (12.2%)

Summary of Results:

Back Position (Table 4.1 & Figure 4.1)

- Over half (54.2%) of women who reported putting their new baby to sleep on his or her back most of the time. These women were more likely to be:
 - ➤ Non-Medicaid recipients
- ☐ White women (56.6%) were significantly more likely to report putting their new baby to sleep on his or her back most of the time compared to African American women (41.3%) and Hispanic women (43.1%).
- □ Women who had more than 12 years of education (58.7%) were significantly more likely to report putting their baby to sleep on their back compared to those who had less than a high school education (42.5%).
- ☐ The following indicators were not associated with women's report of putting their new baby to sleep on their back most of the time: maternal age, marital status, and the infant's birth weight status.

Table 4.1: Women who reported putting their new baby to sleep on his or her back most of the time.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,827)	(n= 2,984)	(%= 54.2)	(52.2-56.2)
Maternal Age				
<20 years	977	474	48.4	(42.9-53.9)
20-24 years	1,506	734	50.8	(46.7-54.9)
25-34 years	2,788	1,479	56.5	(53.8-59.2)
35+ years	556	297	58.0	(51.7-64.3)
Race/Ethnicity				
White	1,375	781	56.6	(54.1-59.1)
African American	927	387	41.3	(38.4-44.2)
Native American	1,205	668	54.5	(52.0-57.0)
Asian/Pacific Islander	1,166	648	54.8	(52.1-57.5)
Hispanic	1,154	500	43.1	(40.4-45.8)
Maternal Education ^c				
<12 years	1,265	559	42.5	(37.8-47.2)
12 years	1,664	822	55.0	(51.3-58.7)
>12 years	2,273	1,294	58.7	(55.8-61.6)
Marital Status				
Married	3,737	1,975	55.8	(53.4-58.2)
Unmarried	2,080	1,006	50.0	(46.1-53.9)
Medicaid Status				
Medicaid ^d	3,078	1,441	47.7	(44.8-50.6)
Cash Assistance ^e	1,086	485	45.3	(39.6-51.0)
Pre-First Steps (FS) Medicaid Onlyf	1,219	581	46.7	(42.2-51.2)
First Steps Expansion ⁹	773	375	52.1	(46.4-57.8)
Non-Medicaid ^h	2,748	1,542	58.5	(55.8-61.2)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	319	149	51.2	(41.8-60.6)
Normal Birth Weight (>2500 g)	5,495	2,828	54.4	(52.4-56.4)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =207. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

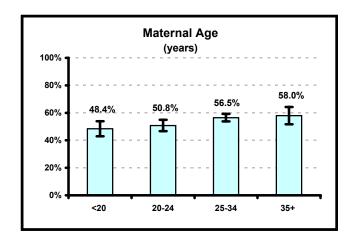
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

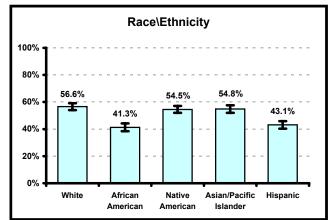
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

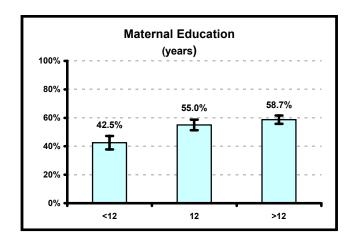
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

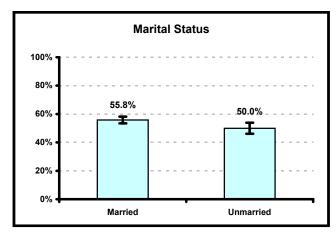
^hNon-Medicaid - women not enrolled in Medicaid.

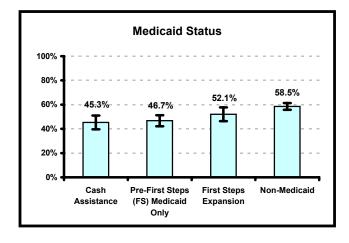
Figure 4.1: Women who reported putting their new baby to sleep on his or her back most of the time.

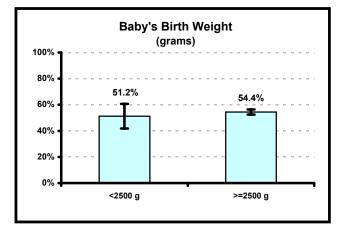












Survey Question #45:

How do you put your new baby down to sleep *most* of the time? Check one answer.

On his or her back (54.2%)

On his or her side (33.6%)

On his or her stomach (12.2%)

Summary of Results:

Side Position (Table 4.2 & Figure 4.2)

- One-third (33.6%) of the PRAMS respondents reported putting their new baby to sleep on his or her side most of the time. These women were more likely to be:
 - > Hispanic
 - ➤ Women with less than a high school education
 - ➤ Unmarried
 - ➤ Medicaid recipients (specifically Pre-First Steps Medicaid Only)
- ☐ Women who put their new baby to sleep on his or her side most of the time did not differ significantly by maternal age or the infant's birth weight status.

Table 4.2: Women who reported putting their new baby to sleep on his or her side most of the time.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,827)	(n= 2,152)	(%= 33.5)	(31.5-35.5)
Maternal Age				
<20 years	977	372	39.1	(33.6-44.6)
20-24 years	1,506	584	36.3	(32.4-40.2)
25-34 years	2,788	999	31.1	(28.6-33.6)
35+ years	556	197	32.7	(26.8-38.6)
Race/Ethnicity				
White	1,375	416	30.5	(28.1-32.9)
African American	927	350	37.9	(35.0-40.8)
Native American	1,205	413	35.2	(32.8-37.6)
Asian/Pacific Islander	1,166	404	35.5	(32.8-38.2)
Hispanic	1,154	569	49.6	(46.9-52.3)
Maternal Education ^c				
<12 years	1,265	584	45.7	(41.0-50.4)
12 years	1,664	620	32.2	(28.7-35.7)
>12 years	2,273	694	28.6	(25.9-31.3)
Marital Status				
Married	3,737	1,327	31.6	(29.4-33.8)
Unmarried	2,080	820	38.6	(34.9-42.3)
Medicaid Status				
Medicaid ^d	3,078	1,302	42.1	(39.2-45.0)
Cash Assistance ^e	1,086	455	42.3	(36.8-47.8)
Pre-First Steps (FS) Medicaid Only ^f	1,219	532	43.6	(39.1-48.1)
First Steps Expansion ⁹	773	315	39.4	(33.9-44.9)
Non-Medicaid ^h	2,748	850	27.9	(25.5-30.3)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	319	134	39.1	(29.9-48.3)
Normal Birth Weight (<u>></u> 2500 g)	5,495	2,012	33.3	(31.3-35.3)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =207. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medcaid Only, or First Steps Expansion.

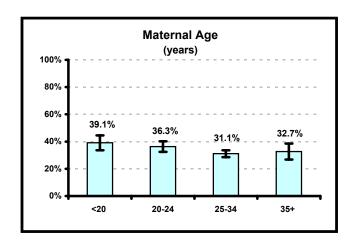
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

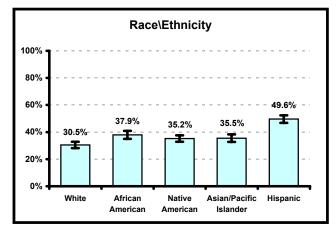
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

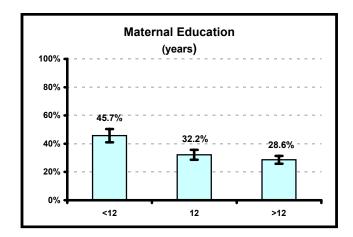
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

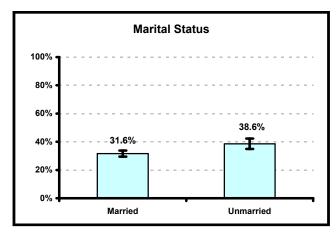
ⁿNon-Medicaid - women not enrolled in Medicaid.

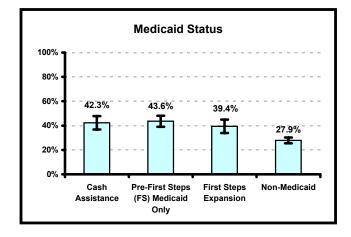
Figure 4.2: Women who reported putting their new baby to sleep on his or her side most of the time.

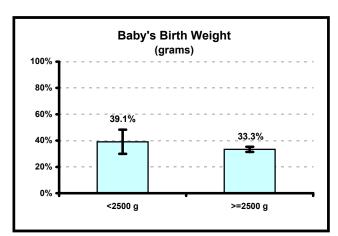












Survey Question #45:

How do you put your new baby down to sleep *most* of the time? Check one answer.

On his or her back (54.2%)

On his or her side (33.6%)

On his or her stomach (12.2%)

Summary of Results:

Stomach Position (Table 4.3 & Figure 4.3)

- Approximately 12.2 percent of women reported putting their new baby to sleep on his or her stomach most of the time. These women were more likely to be:
 - > African American
- ☐ Maternal age, maternal education, marital status, Medicaid status, and the infant's birth weight status were not significantly associated with women's report of putting their new baby to sleep on his or her stomach most of the time.

Table 4.3: Women who reported putting their new baby to sleep on his or her stomach most of the time.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,827)	(n= 691)	(%= 12.2)	(10.8-13.6)
Maternal Age				
<20 years	977	131	12.6	(8.9-16.3)
20-24 years	1,506	188	12.9	(10.2-15.6)
25-34 years	2,788	310	12.4	(10.4-14.4)
35+ years	556	62	9.3	(5.8-12.8)
Race/Ethnicity				
White	1,375	178	12.9	(11.1-14.7)
African American	927	190	20.8	(18.3-23.3)
Native American	1,205	124	10.3	(8.7-11.9)
Asian/Pacific Islander	1,166	114	9.7	(8.1-11.3)
Hispanic	1,154	85	7.3	(5.7-8.9)
Maternal Education ^c				
<12 years	1,265	122	11.8	(8.5-15.1)
12 years	1,664	222	12.9	(10.4-15.4)
>12 years	2,273	285	12.7	(10.5-14.9)
Marital Status				
Married	3,737	435	12.6	(11.0-14.2)
Unmarried	2,080	254	11.4	(9.0-13.8)
Medicaid Status				
Medicaid ^d	3,078	335	10.2	(8.2-12.2)
Cash Assistance ^e	1,086	146	12.4	(8.7-16.1)
Pre-First Steps (FS) Medicaid Onlyf	1,219	106	9.7	(6.8-12.6)
First Steps Expansion ^g	773	83	8.5	(5.6-11.4)
Non-Medicaid ^h	2,748	356	13.6	(11.6-15.6)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	319	36	9.7	(4.2-15.2)
Normal Birth Weight (≥2500 g)	5,495	655	12.4	(11.0-13.8)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =207. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

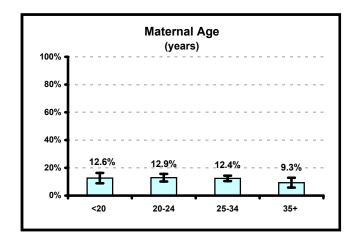
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

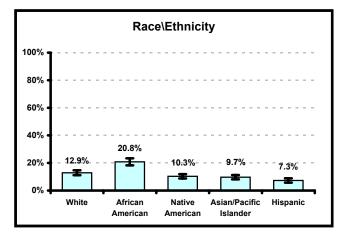
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

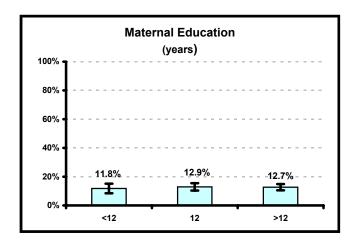
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

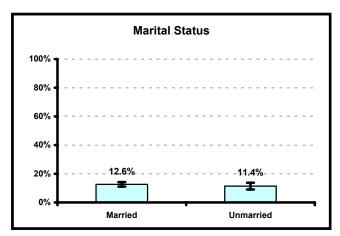
^hNon-Medicaid - women not enrolled in Medicaid.

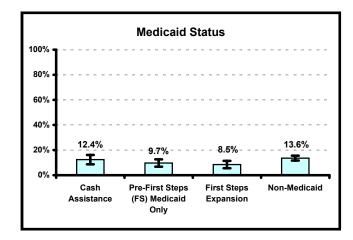
Figure 4.3: Women who reported putting their new baby to sleep on his or her stomach most of the time.

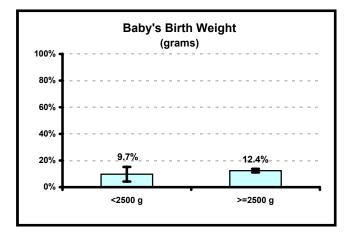












STRESS AND SUPPORT AROUND THE TIME OF PREGNANCY

WASHINGTON STATE PRAMS 1996-1998



Stress and Support Around the Time of Pregnancy

Stress is defined as whatever a person experiences as traumatic. It can be either real or perceived and have a biological or psychological origin. Stress is known to have an impact on pregnancy outcomes. Low birth weight is associated with infant mortality rates and stress has been shown to influence both birth weight and preterm deliveries. The risk of having a low birth weight infant is one and one-half times greater for women who perceive their lives as constantly stressful during pregnancy.

Stress has been shown to increase the production of a hormone called corticotropin-releasing hormone (CRH). CRH prompts the body to produce prostaglandins that triggers uterine contractions, possibly leading to preterm labor. Stress may also play a role indirectly in influencing a woman's health related behaviors during pregnancy. Women under significant stress are more likely to miss medical appointments, have a poor diet, and continue using tobacco and or alcohol and drugs.^{3,4}

Appropriate social support during pregnancy may buffer some effects of stress. As it is with stress, an individual's perception of useful social support varies. Both the number of people and the skills they bring to the relationship impact the usefulness of the support system. If the receiver of the support feels cared for and loved, the primary objective has been met.^{5,6}

Recent studies have shown that African American and Native American women are more likely to report experiencing stressful events during pregnancy than Caucasian women. African American and Native American populations have shown the least improvement in reducing incidences of low birth weight and infant mortality. Addressing stress factors for these women is one possible approach to improving outcomes.

In Washington State, PRAMS data on stress and support around the time of pregnancy is considered in the development and evaluation of social support services programs for women and infants. In the state's First Steps Program, one of the three professional disciplines on the maternity Support Services team is a psychosocial worker. This professional looks at the pregnant woman's needs from a perspective that addresses stress and the ways the woman develops and accesses social supports.

Reducing stress and improving social support systems for women may help Washington state accomplish the goals described in Healthy People 2010 of reducing the number of low birth weight infants and decreasing infant mortality. The most significant impact may be in the African American and Native American populations that have higher stress levels and higher incidents of low birth weight infants.

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² Sable MR, Wilkenson DS. Impact of Perceived Stress, Major Life Events and Pregnancy Attitudes on Low Birth Weight. Family Planning Perspectives 2000;32(6):288-294.

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This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

a. A close family member was very sick and had to go into the hospital.

No (76.8%)

Yes (23.2%)

Summary of Results:

Close Family Member III during the 12 Months before Delivery (Table 5.1 & Figure 5.1)

- ☐ Approximately 23.2 percent of women said a close family member was very sick and had to go into the hospital during the 12 months before delivering their new baby. These women were more likely to be:
 - Native American
- ☐ Women who reported they had a close family member who was sick and had to go into the hospital during the 12 months before delivery did not significantly differ by maternal age, maternal education, marital status, Medicaid status, or the infant's birth weight status.

Table 5.1: Women who reported that during the 12 months before they delivered their new baby, a close family member was very sick and had to go into the hospital.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,980)	(n= 1,318)	(%= 23.2)	(21.4-25.0)
Maternal Age				
<20 years	1,013	265	24.9	(20.2-29.6)
20-24 years	1,537	348	22.9	(19.4-26.4)
25-34 years	2,858	599	22.9	(20.5-25.3)
35+ years	571	106	23.1	(17.6-28.6)
Race/Ethnicity				
White	1,403	353	25.0	(22.6-27.4)
African American	959	204	21.4	(18.9-23.9)
Native American	1,243	402	32.0	(29.6-34.4)
Asian/Pacific Islander	1,201	183	15.4	(13.4-17.4)
Hispanic	1,174	176	14.9	(12.9-16.9)
Maternal Education ^c				
<12 years	1,302	274	19.4	(15.5-23.3)
12 years	1,703	398	23.4	(20.3-26.5)
>12 years	2,319	535	26.0	(23.3-28.7)
Marital Status				
Married	3,815	778	23.1	(21.1-25.1)
Unmarried	2,154	536	23.2	(20.1-26.3)
Medicaid Status				
Medicaid ^d	3,161	695	20.8	(18.3-23.3)
Cash Assistance ^e	1,126	298	25.9	(21.0-30.8)
Pre-First Steps (FS) Medicaid Only ^f	1,249	251	19.3	(15.6-23.0)
First Steps Expansion ⁹	786	146	17.0	(12.7-21.3)
Non-Medicaid ^h	2,803	618	24.8	(22.4-27.2)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	79	25.1	(16.9-33.3)
Normal Birth Weight (≥2500 g)	5,612	1,238	23.1	(21.3-24.9)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =54. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831). ^c10% or more of the Maternal Education data are missing from birth certificate data.

dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

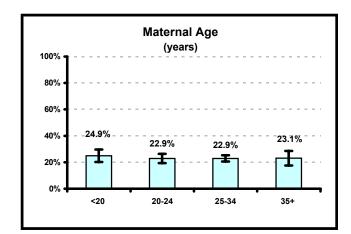
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

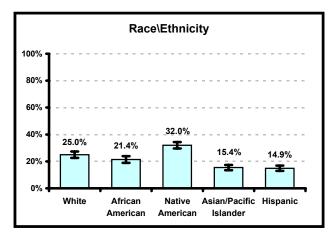
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

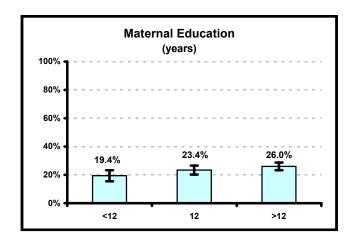
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

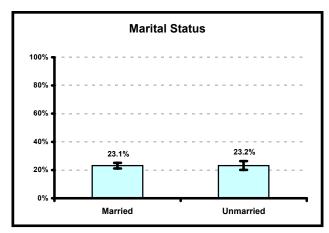
ⁿNon-Medicaid - women not enrolled in Medicaid.

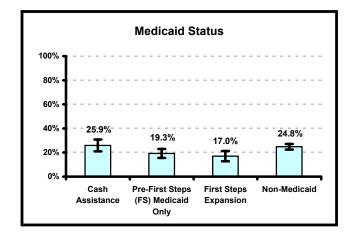
Figure 5.1: During the 12 months before they delivered their new baby, a close family member was very sick and had to go into the hospital.

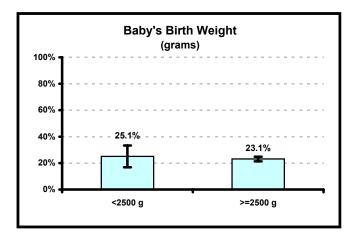












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

b. You got separated or divorced from your husband or partner.

No (89.6%)

Yes (10.4%)

Summary of Results:

Separated or Divorced from Husband or Partner during the 12 Months before Delivery (Table 5.2 & Figure 5.2)

- ☐ Around ten percent (10.4%) of women reported they got separated or divorced from their husband or partner during the 12 months before delivering their new baby. These women were more likely to be:
 - Teenagers
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- □ Native American women (23.6%) and African American women (21.2%) were significantly more likely to report they got separated or divorced from their husband or partner during the 12 months before delivery compared to Hispanic women (13.7%), White women (9.2%), and Asian/Pacific Islander women (8.3%).
- □ Women with less than a high school education (18.1%) were three times more likely to report they got separated or divorced from husband or partner during the 12 months before delivery compared to those who were educated beyond high school (5.9%).
- ☐ There was no association between getting separated or divorced from husband or partner during the 12 months before delivery and the infant's birth weight status.

Table 5:2: Women who reported that during the 12 months before delivering their new baby, they got separated or divorced from their husband or partner.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,982)	(n= 844)	(%= 10.4)	(9.2-11.6)
Maternal Age				
<20 years	1,009	245	23.5	(18.8-28.2)
20-24 years	1,538	270	15.1	(12.2-18.0)
25-34 years	2,859	276	5.8	(4.6-7.0)
35+ years	575	53	6.8	(3.9-9.7)
Race/Ethnicity				
White	1,402	124	9.2	(7.6-10.8)
African American	962	191	21.2	(18.7-23.7)
Native American	1,239	277	23.6	(21.4-25.8)
Asian/Pacific Islander	1,201	94	8.3	(6.7-9.9)
Hispanic	1,178	158	13.7	(11.7-15.7)
Maternal Education ^c				
<12 years	1,304	258	18.1	(14.4-21.8)
12 years	1,702	282	12.9	(10.5-15.3)
>12 years	2,320	197	5.9	(4.5-7.3)
Marital Status				
Married	3,819	214	3.8	(3.0-4.6)
Unmarried	2,152	627	28.3	(25.0-31.6)
Medicaid Status				
Medicaid ^d	3,162	673	19.7	(17.3-22.1)
Cash Assistance ^e	1,124	355	31.0	(25.9-36.1)
Pre-First Steps (FS) Medicaid Onlyf	1,252	234	16.1	(13.0-19.2)
First Steps Expansion ⁹	786	84	11.7	(7.8-15.6)
Non-Medicaid ^h	2,804	163	4.0	(3.0-5.0)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	56	9.4	(4.5-14.3)
Normal Birth Weight (≥2500 g)	5,614	785	10.4	(9.2-11.6)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =52. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

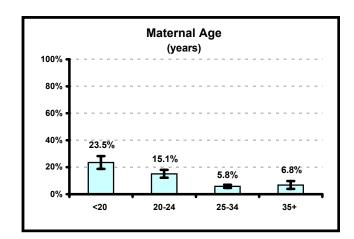
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

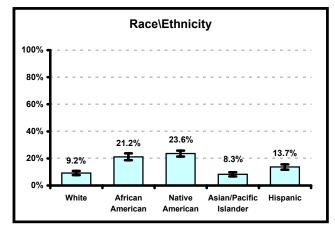
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

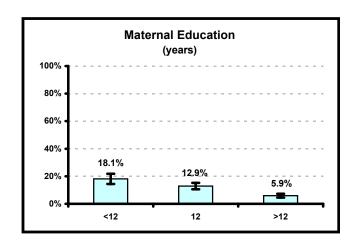
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

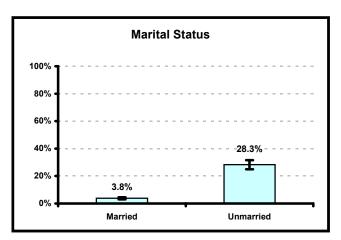
ⁿNon-Medicaid - women not enrolled in Medicaid.

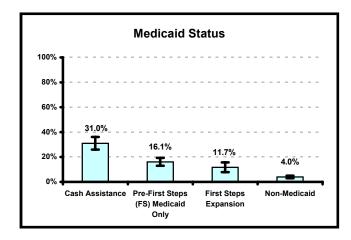
Figure 5:2: Women who reported that during the 12 months before delivering their new baby, they go separated or divorced from their husband or partner. Washington State PRAMS 1996-1998

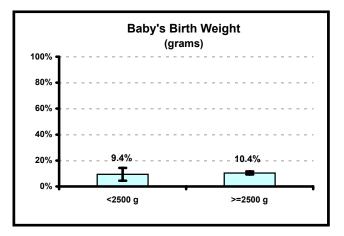












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

c. You moved to a new address.

No (56.9%)

Yes (43.1%)

Summary of Results:

Moved to a New Address during the 12 Months before Delivery (Table 5.3 & Figure 5.3)

Over forty percent (43.1%) of women reported they moved to a new address during the 12 months before delivering their new baby. These women were more likely to be:

 Medicaid recipients (specifically Cash Assistance)

 Teenagers (60.7%) were significantly more likely to report moving to a new address during the 12 months before delivery compared to women aged 35 or older (25.9%) or women aged 25 to 34 (36.2%).
 African American women (49.9%) were significantly more than likely to report they moved to a new address during the 12 months before delivery compared to Asian/Pacific Islander (36.6%), Hispanic women (41.6%) and White women (43.5%).
 Moving to a new address during the 12 months before delivery occurred more often among women with less than a high school education (50.8%) compared to those who were educated beyond high school (39.0%)

☐ There was no association between getting separated or divorced from husband or partner

during the 12 months before delivery and the infant's birth weight status.

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Table 5.3: Women who reported that during the 12 months before the delivery of their new baby, they moved to a new address. Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,997)	(n= 2,574)	(%= 43.1)	(41.1-45.1)
Maternal Age				
<20 years	1,013	564	60.7	(55.4-66.0)
20-24 years	1,546	863	56.2	(52.1-60.3)
25-34 years	2,862	987	36.2	(33.5-38.9)
35+ years	575	159	25.9	(20.4-31.4)
Race/Ethnicity				
White	1,406	604	43.5	(41.0-46.0)
African American	963	477	49.9	(46.8-53.0)
Native American	1,246	569	46.6	(44.1-49.1)
Asian/Pacific Islander	1,204	437	36.6	(33.9-39.3)
Hispanic	1,178	487	41.6	(38.9-44.3)
Maternal Education ^c				
<12 years	1,308	597	50.8	(46.1-55.5)
12 years	1,705	800	47.5	(43.8-51.2)
>12 years	2,324	908	39.0	(36.1-41.9)
Marital Status				
Married	3,823	1,453	38.4	(36.0-40.8)
Unmarried	2,163	1,118	56.1	(52.4-59.8)
Medicaid Status				
Medicaid ^d	3,172	1,563	53.4	(50.5-56.3)
Cash Assistance ^e	1,129	637	62.0	(56.7-67.3)
Pre-First Steps (FS) Medicaid Onlyf	1,257	599	53.4	(48.9-57.9)
First Steps Expansion ⁹	786	327	43.1	(37.4-48.8)
Non-Medicaid ⁿ	2,809	1,001	36.1	(33.6-38.6)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	352	157	46.5	(37.5-55.5)
Normal Birth Weight (<u>></u> 2500 g)	5,630	2,412	42.9	(40.9-44.9)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =37. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - Womn on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

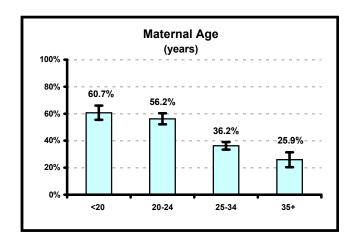
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

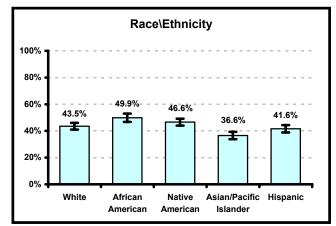
Pre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

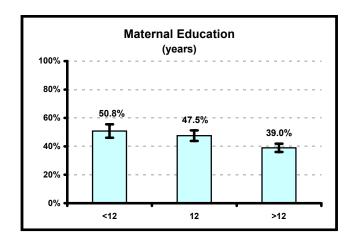
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

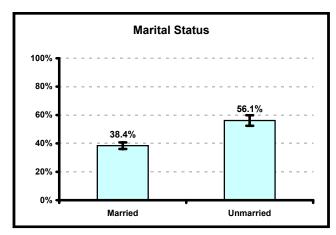
^hNon-Medicaid - women not enrolled in Medicaid.

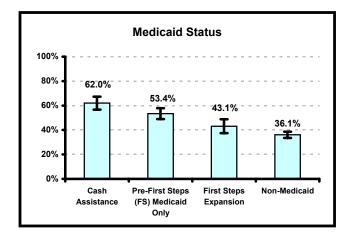
Figure 5.3: Women who reported that during the 12 months before the delivery of their new baby, they moved to a new address.

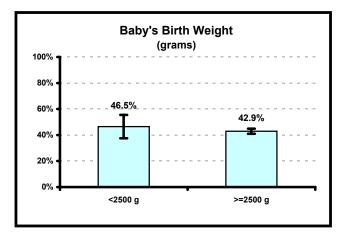












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

d. You were homeless.

No (95.4%)

Yes (4.6%)

Summary of Results:

Homeless during the 12 Months before Delivery (Table 5.4 & Figure 5.4)

- □ Nearly five percent (4.6%) of women said they were homeless during the 12 months before delivering their new baby. These women were more likely to be:
 - > Hispanic
 - Women with less than a high school education
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ According to the PRAMS data, teenagers (9.7%) experienced more homelessness during the 12 months before delivery than women aged 25 to 34 (2.5%) and women aged 35 or older (3.7%).
- ☐ The proportion of women who reported being homeless during the 12 months before delivery did not differ significantly by the infant's birth weight status.

Table 5.4: Women who reported that during the 12 months before delivering their new baby, they were homeless.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,972)	(n= 444)	(%= 4.6)	(3.8-5.4)
Maternal Age				
<20 years	1,008	117	9.7	(6.8-12.6)
20-24 years	1,538	146	6.7	(4.9-8.5)
25-34 years	2,851	151	2.5	(1.9-3.1)
35+ years	574	29	3.7	(1.5-5.9)
Race/Ethnicity				
White	1,405	30	2.4	(1.6-3.2)
African American	960	77	8.2	(6.4-10.0)
Native American	1,243	107	9.1	(7.7-10.5)
Asian/Pacific Islander	1,203	19	1.7	(0.9-2.5)
Hispanic	1,161	211	18.4	(16.2-20.6)
Maternal Education ^c				
<12 years	1,297	215	14.0	(11.3-16.7)
12 years	1,700	114	3.6	(2.4-4.8)
>12 years	2,322	56	1.3	(0.7-1.9)
Marital Status				
Married	3,807	185	2.6	(2.0-3.2)
Unmarried	2,154	257	10.0	(7.8-12.2)
Medicaid Status				
Medicaid ^d	3,150	410	10.5	(8.9-12.1)
Cash Assistance ^e	1,123	163	12.2	(8.5-15.9)
Pre-First Steps (FS) Medicaid Onlyf	1,245	174	11.1	(8.9-13.3)
First Steps Expansion ⁹	782	73	7.6	(5.4-9.8)
Non-Medicaid ^h	2,806	30	0.5	(0.3-0.7)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	352	30	3.8	(1.3-6.3)
Normal Birth Weight (≥2500 g)	5,605	413	4.6	(3.8-5.4)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =62. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

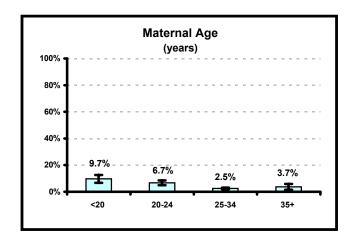
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

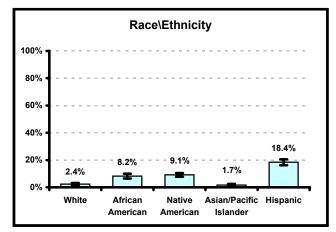
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

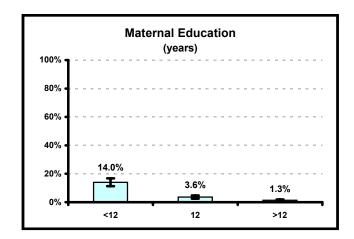
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

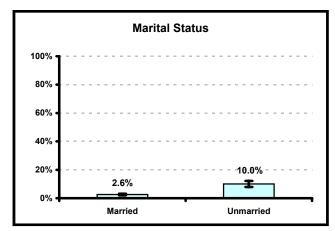
^hNon-Medicaid - women not enrolled in Medicaid.

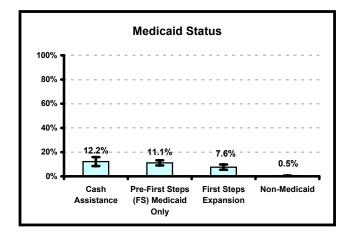
Figure 5.4: Women who reported that during the 12 months before delivering their new baby, they were homeless.

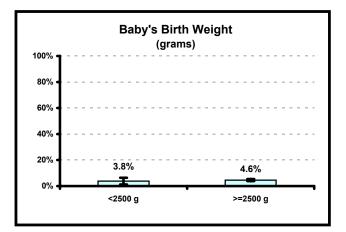












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

e. Your husband or partner lost his job.

No (86.5%)

Yes (13.5%)

Summary of Results:

Husband or Partner Lost Job during the 12 Months before Delivery (Table 5.5 & Figure 5.5)

- ☐ An estimated 13.5 percent of women said their husband or partner lost his job during the 12 months before delivering their new baby. These women were more likely to be:
 - > Native American
 - ➤ Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ Teenagers (22.5%) were significantly more likely to report their husband or partner lost his job during the 12 months before delivery compared to women aged 25 to 34 (9.1%) and women aged 35 or older (11.5%).
- ☐ There was no association between women who reported their husband or partner lost his job during the 12 months before delivery and the infant's birth weight status.

Table 5.5: Women who reported that during the 12 months before delivering their new baby, their husband or partner lost his job.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,936)	(n= 808)	(%= 13.5)	(12.1-14.9)
Maternal Age				
<20 years	995	184	22.5	(17.6-27.4)
20-24 years	1,529	267	19.3	(16.0-22.6)
25-34 years	2,838	299	9.1	(7.5-10.7)
35+ years	573	58	11.5	(7.4-15.6)
Race/Ethnicity				
White	1,404	187	13.8	(12.0-15.6)
African American	951	114	12.5	(10.3-14.7)
Native American	1,232	245	20.0	(18.0-22.0)
Asian/Pacific Islander	1,196	112	9.4	(7.8-11.0)
Hispanic	1,153	150	13.2	(11.2-15.2)
Maternal Education ^c				
<12 years	1,281	211	21.1	(17.0-25.2)
12 years	1,689	243	15.2	(12.5-17.9)
>12 years	2,318	266	10.2	(8.2-12.2)
Marital Status				
Married	3,806	417	10.8	(9.2-12.4)
Unmarried	2,119	389	20.9	(17.8-24.0)
Medicaid Status				
Medicaid ^d	3,118	609	23.1	(20.4-25.8)
Cash Assistance ^e	1,107	249	27.4	(22.3-32.5)
Pre-First Steps (FS) Medicaid Onlyf	1,229	229	21.4	(17.5-25.3)
First Steps Expansion ⁹	782	131	20.3	(15.4-25.2)
Non-Medicaid ^h	2,802	198	7.2	(5.8-8.6)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	348	43	15.5	(8.6-22.4)
Normal Birth Weight (≥2500 g)	5,573	762	13.4	(12.0-14.8)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =98. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

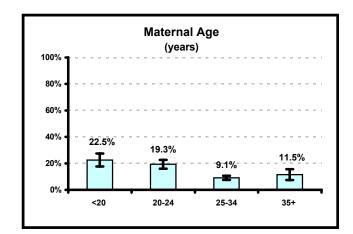
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

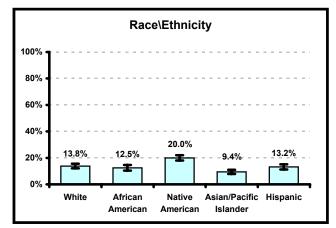
Pre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

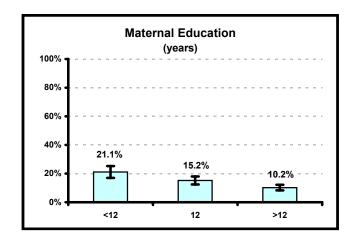
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

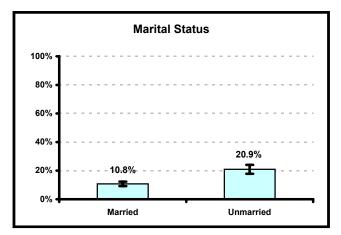
^hNon-Medicaid - women not enrolled in Medicaid.

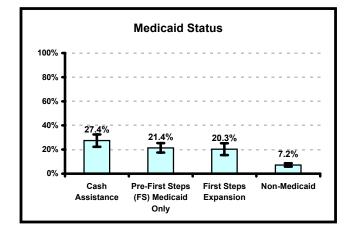
Figure 5.5: Women who reported that during the 12 months before delivering their new baby, their husband or partner lost his job.

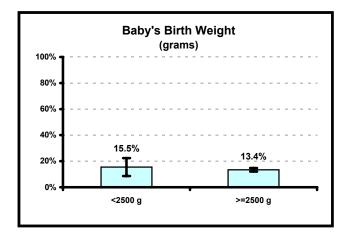












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

f. You lost your job even though you wanted to go on working.

No (90.5%) Yes (9.5%)

Summary of Results:

Mother Lost Job during the 12 Months before Delivery (Table 5.6 & Figure 5.6)

- ☐ Almost ten percent (9.5%) of women said they lost their job even though they wanted to keep on working during the 12 months before delivering their new baby. These women were more likely to be:
 - Unmarried
 - Medicaid recipients (specifically Pre-First Steps Medicaid Only)
- □ Women aged 20 to 24 (13.0%) were three times more likely to report during the 12 months before delivering their new baby they lost their job even though they wanted to keep on working compared to women aged 35 years or older (4.6%) and women aged 25-34 years (8.5%).
- ☐ African American women (13.9%) were significantly more likely to report during the 12 months before delivering their new baby they lost their job even though they wanted to keep on working compared to Asian/Pacific Islander women (8.0%) and White women (8.7%).
- ☐ The following indicators were not associated with women's report of losing their job during the 12 months before delivering their new baby: maternal education and the infant's birth weight status.

Table 5.6: Women who reported that during the 12 months before delivering their new baby, they lost their job even though the wanted to go on working.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,960)	(n= 668)	(%= 9.5)	(8.3-10.7)
Maternal Age				
<20 years	1,004	120	11.4	(7.9-14.9)
20-24 years	1,537	216	13.0	(10.3-15.7)
25-34 years	2,847	294	8.5	(6.9-10.1)
35+ years	572	38	4.6	(2.1-7.1)
Race/Ethnicity				
White	1,403	120	8.7	(7.1-10.3)
African American	957	134	13.9	(11.7-16.1)
Native American	1,241	167	13.5	(11.7-15.3)
Asian/Pacific Islander	1,198	93	8.0	(6.4-9.6)
Hispanic	1,161	154	13.4	(11.4-15.4)
Maternal Education ^c				
<12 years	1,290	165	12.3	(9.4-15.2)
12 years	1,699	203	8.9	(6.7-11.1)
>12 years	2,317	207	8.1	(6.3-9.9)
Marital Status				
Married	3,803	335	7.4	(6.2-8.6)
Unmarried	2,146	329	15.3	(12.6-18.0)
Medicaid Status				
Medicaid ^d	3,139	509	16.1	(13.9-18.3)
Cash Assistance ^e	1,116	200	17.9	(13.6-22.2)
Pre-First Steps (FS) Medicaid Onlyf	1,241	201	16.2	(12.9-19.5)
First Steps Expansion ⁹	782	108	13.8	(9.9-17.7)
Non-Medicaid ^h	2,805	156	5.0	(3.8-6.2)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	349	55	15.7	(9.2-22.2)
Normal Birth Weight (<u>></u> 2500 g)	5,596	612	9.2	(8.0-10.4)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =74. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

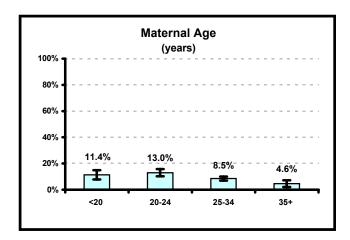
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

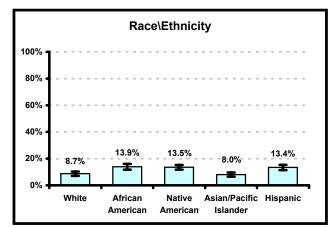
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

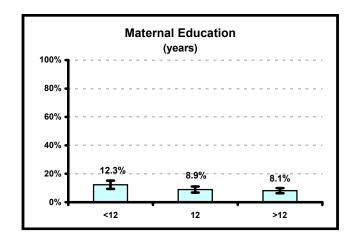
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

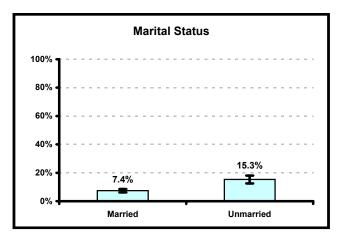
^hNon-Medicaid - women not enrolled in Medicaid.

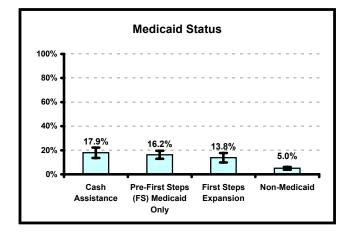
Figure 5.6: Women who reported that during the 12 months before delivering their new baby, they lost their job even though the wanted to go on working. Washington State PRAMS 1996-1998

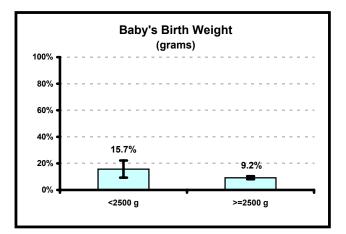












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

g. You and your husband or partner argued more than usual.

No (72.8%)

Yes (27.2%)

Summary of Results:

Mother and Husband or Partner Argued More Than Usual during the 12 Months before Delivery (Table 5.7 & Figure 5.7)

- □ Nearly thirty percent (27.2%) of women said they argued with their husband or partner more than usual during the 12 months before delivering their new baby. These women were more likely to be:
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- □ According to the PRAMS data, teenagers (42.9%) were more likely to report they argued with their husband or partner more than usual during the 12 months before delivery their new baby compared to women aged 25 to 34 (20.9%) and women aged 35 or older (21.8%).
- □ Native American women (46.7%) were significantly more likely to report during the 12 months before delivering their new baby they argued with their husband or partner more than usual compared to Asian/Pacific Islander women (21.0%), Hispanic women (26.1%), and White women (26.6%).
- □ Women who had less than a high school education (33.6%) reported during the 12 months before delivering their new baby they argued with their husband or partner more than usual compared to women who were educated beyond high school (21.3%).
- ☐ The infant's birth weight status was not significantly associated with women's report they argued with their husband or partner more than usual during the 12 months before delivering their new baby.

Table 5.7: Women who reported that during the 12 months before delivering their new baby, they and their husband or partner argued more than usual.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,963)	(n= 1,882)	(%= 27.2)	(25.4-29.0)
Maternal Age				
<20 years	1,004	464	42.9	(37.4-48.4)
20-24 years	1,537	592	34.7	(30.8-38.6)
25-34 years	2,848	691	20.9	(18.5-23.3)
35+ years	573	134	21.8	(16.7-26.9)
Race/Ethnicity				
White	1,402	367	26.6	(24.2-29.0)
African American	958	402	42.9	(40.0-45.8)
Native American	1,238	558	46.7	(44.2-49.2)
Asian/Pacific Islander	1,194	250	21.0	(18.8-23.2)
Hispanic	1,171	305	26.1	(23.6-28.6)
Maternal Education ^c				
<12 years	1,295	470	33.6	(29.1-38.1)
12 years	1,699	616	31.9	(28.4-35.4)
>12 years	2,317	600	21.3	(18.8-23.8)
Marital Status				
Married	3,810	897	21.1	(19.1-23.1)
Unmarried	2,142	980	43.9	(40.2-47.6)
Medicaid Status				
Medicaid ^d	3,144	1,207	37.1	(34.2-40.0)
Cash Assistance ^e	1,117	551	49.3	(43.6-55.0)
Pre-First Steps (FS) Medicaid Onlyf	1,245	437	32.9	(28.6-37.2)
First Steps Expansion ⁹	782	219	28.6	(23.3-33.9)
Non-Medicaid ^h	2,803	667	20.6	(18.4-22.8)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	351	112	25.1	(17.3-32.9)
Normal Birth Weight (≥2500 g)	5,597	1,765	27.4	(25.6-29.2)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =71. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

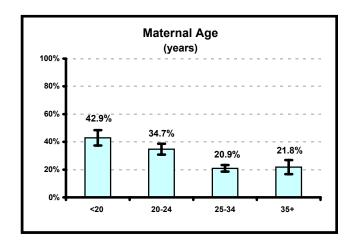
 $^{^{\}mathrm{e}}$ Cash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

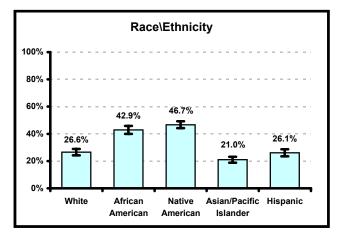
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

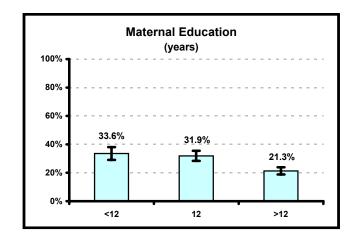
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

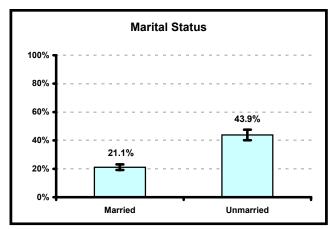
^hNon-Medicaid - women not enrolled in Medicaid.

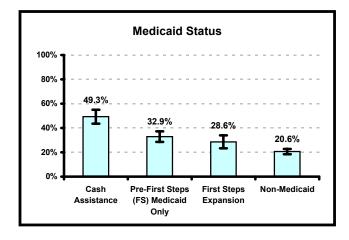
Figure 5.7: Women who reported that during the 12 months before delivering their new baby, they and their husband or partner argued more than usual. Washington State PRAMS 1996-1998

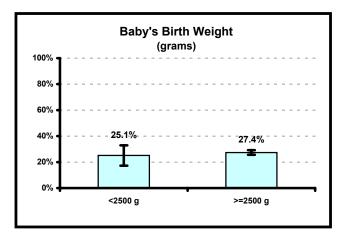












This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

h. Your husband or partner said he did not want you to be pregnant.

No (89.5%)

Yes (10.5%)

Summary of Results:

Husband or Partner Did Not Want Pregnancy during the Most Recent Pregnancy (Table 5.8 & Figure 5.8)

- ☐ Around ten percent (10.5%) of women said their husband or partner did not want them to be pregnant during the 12 months before delivering their new baby. These women were more likely to be:
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ Teenagers (18.4%) were two times more likely to report their husband or partner did not want them to be pregnant during the 12 months before delivery their new baby compared to women aged 35 or older (9.0%).
- ☐ Significantly more African American women (18.3%) said their husband or partner did not want them to be pregnant compared to Asian/Pacific Islander women (8.3%), White women (10.2%), and Hispanic women (10.4%).
- □ Women who reported that their husband or partner did not want the pregnancy during the 12 months prior to delivering their new baby were more likely to have less than a high school (13.7%) compared to women who were educated beyond high school (8.3%).
- Among the women who reported their husband or partner did not want them to be pregnant during the 12 months prior to delivering their new baby, there was no difference between the proportion of women who delivered a low birth weight infant (<2500 grams) and those who delivered an infant of normal weight (>2500 grams).

Table 5.8: Women who reported that during the 12 months before delivering their new baby, their husband or partner did not want them to be pregnant.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,967)	(n= 709)	(%= 10.5)	(9.3-11.7)
Maternal Age				
<20 years	1,004	183	18.4	(14.1-22.7)
20-24 years	1,537	198	13.1	(10.4-15.8)
25-34 years	2,852	270	7.7	(6.3-9.1)
35+ years	573	58	9.0	(5.5-12.5)
Race/Ethnicity				
White	1,401	138	10.2	(8.6-11.8)
African American	958	168	18.3	(15.9-20.7)
Native American	1,240	191	16.0	(14.2-17.8)
Asian/Pacific Islander	1,194	94	8.3	(6.7-9.9)
Hispanic	1,174	118	10.4	(8.6-12.2)
Maternal Education ^c				
<12 years	1,301	196	13.7	(10.4-17.0)
12 years	1,699	213	12.2	(9.7-14.7)
>12 years	2,314	209	8.3	(6.5-10.1)
Marital Status				
Married	3,812	257	5.9	(4.7-7.1)
Unmarried	2,144	451	23.0	(19.7-26.3)
Medicaid Status				
Medicaid ^d	3,151	482	14.7	(12.5-16.9)
Cash Assistance ^e	1,118	231	19.6	(15.1-24.1)
Pre-First Steps (FS) Medicaid Onlyf	1,247	163	12.9	(9.8-16.0)
First Steps Expansion ⁹	786	88	11.7	(8.0-15.4)
Non-Medicaid ^h	2,800	221	7.6	(6.2-9.0)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	351	45	10.5	(5.0-16.0)
Normal Birth Weight (<u>></u> 2500 g)	5,601	663	10.6	(9.2-12.0)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =67. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

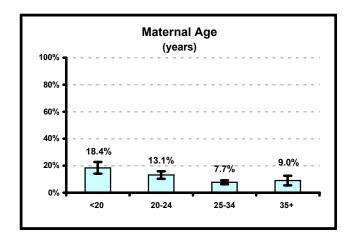
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

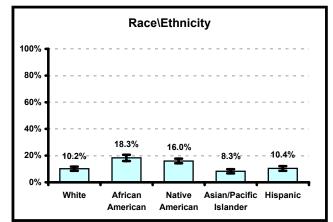
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

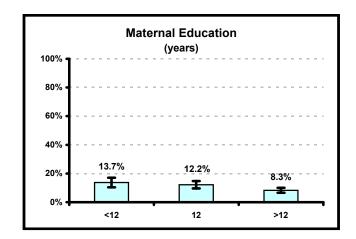
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

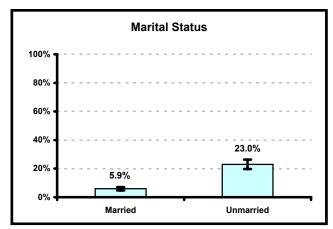
^hNon-Medicaid - women not enrolled in Medicaid.

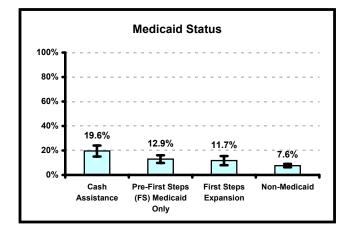
Figure 5.8: Women who reported that during the 12 months before delivering their new baby, their husband or partner did not want them to be pregnant. Washington State PRAMS 1996-1998

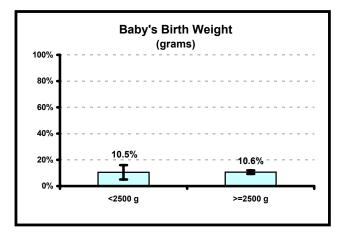












Survey Question 30:

This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

i. You had a lot of bills you couldn't pay.

No (72.2%)

Yes (27.8%)

Summary of Results:

Unable to Pay Bills during the 12 Months before Delivery (Table 5.9 & Figure 5.9)

- ☐ An estimated 27.8 percent of women reported they had a lot of bills they could not pay during the 12 months before delivering their new baby. These women were more likely to be:
 - Women 20 to 24 years of age
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- □ Native American women (40.6%) were twice as likely to report that they had a lot of bills they could not pay during the 12 months before delivering their new baby compared to Asian/Pacific Islander women (19.0%).
- □ Women who had less than a high school education (31.0%) were significantly more likely to report having a lot of bills they could not pay during the 12 months prior to delivering their new baby compared to those who were educated beyond high school (21.0%).
- ☐ Women's report of having bills they could not pay during the 12 months prior to delivering their new baby did not differ significantly by the infant's birth weight.

Table 5.9: Women who reported that during 12 months before delivering their new baby, they had a lot of bills they couldn't pay.

Maternal	Respondents	Yes	% Yesb	95% CI
Characteristics ^a	(n= 5,983)	(n= 1,760)	(%= 27.8)	(26.0-29.6)
Maternal Age				
<20 years	1,012	257	28.3	(23.4-33.2)
20-24 years	1,543	626	41.5	(37.4-45.6)
25-34 years	2,854	757	23.3	(20.9-25.7)
35+ years	573	119	18.5	(13.6-23.4)
Race/Ethnicity				
White	1,401	384	27.9	(25.5-30.3)
African American	962	349	36.8	(33.9-39.7)
Native American	1,243	494	40.6	(38.2-43.0)
Asian/Pacific Islander	1,197	217	19.0	(16.8-21.2)
Hispanic	1,180	316	26.7	(24.2-29.2)
Maternal Education ^c				
<12 years	1,305	364	31.0	(26.5-35.5)
12 years	1,702	631	36.5	(32.8-40.2)
>12 years	2,320	571	21.0	(18.5-23.5)
Marital Status				
Married	3,814	953	23.1	(21.1-25.1)
Unmarried	2,158	803	40.4	(36.7-44.1)
Medicaid Status				
Medicaid ^d	3,166	1,187	42.4	(39.5-45.3)
Cash Assistance ^e	1,128	486	48.2	(42.7-53.7)
Pre-First Steps (FS) Medicaid Onlyf	1,250	403	37.5	(33.0-42.0)
First Steps Expansion ⁹	788	298	42.9	(37.2-48.6)
Non-Medicaid ^h	2,801	566	17.9	(15.9-19.9)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	92	28.0	(19.8-36.2)
Normal Birth Weight (<u>></u> 2500 g)	5,615	1,664	27.8	(25.8-29.8)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database

Missing responses =51. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

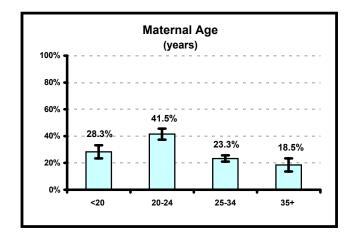
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

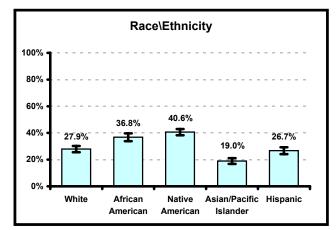
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

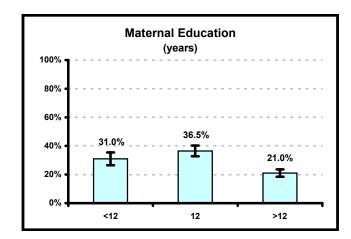
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

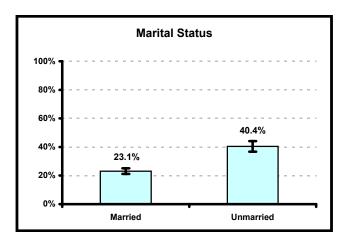
^hNon-Medicaid - women not enrolled in Medicaid.

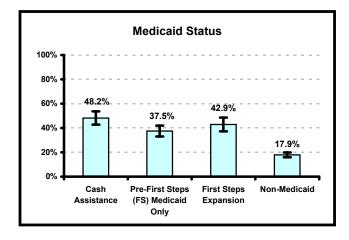
Figure 5.9: Women who reported that during 12 months before delivering their new baby, they had a lot of bills they couldn't pay.

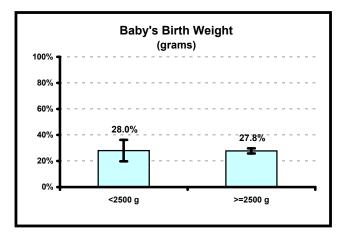












Survey Question 30:

This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

j. You were involved in a physical fight.

No (95.7%) Yes (4.3%)

Summary of Results:

Involved in a Physical Fight during the 12 Months before Delivery (Table 5.10 & Figure 5.10)

- Approximately 4.3 percent of women said they were involved in a physical fight during the 12 months before delivering their new baby. These women were more likely to be:
 - Women with less than a high school education
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ Teenagers (11.4%) were seven times more likely to report being involved in a physical fight during the 12 months before delivering their new baby compared to women aged 25 to 34 years (1.6%).
- □ Native American women (14.6%) were almost five times more likely to report being involved in a physical fight during the 12 months before delivering their new baby compared to Asian/Pacific Islander women (3.1%).
- ☐ There was no association between women's report of being involved in a physical fight during the 12 months before delivering their new baby and the infant's birth weight status.

Table 5.10: Women who reported that during the 12 months before delivering their new baby, they were involved in a physical fight. Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,984)	(n= 430)	(%= 4.3)	(3.5-5.1)
Maternal Age				
<20 years	1,012	140	11.4	(7.9-14.9)
20-24 years	1,540	152	7.3	(5.3-9.3)
25-34 years	2,858	121	1.6	(1.0-2.2)
35+ years	573	17	2.2	(0.4-4.0)
Race/Ethnicity				
White	1,405	46	3.5	(2.5-4.5)
African American	961	115	12.6	(10.4-14.8)
Native American	1,243	169	14.6	(12.8-16.4)
Asian/Pacific Islander	1,199	35	3.1	(2.1-4.1)
Hispanic	1,176	65	5.5	(4.1-6.9)
Maternal Education ^c				
<12 years	1,306	149	8.8	(6.1-11.5)
12 years	1,703	133	4.3	(2.9-5.7)
>12 years	2,322	94	2.6	(1.6-3.6)
Marital Status				
Married	3,817	127	2.0	(1.4-2.6)
Unmarried	2,156	301	10.6	(8.2-13.0)
Medicaid Status				
Medicaid ^d	3,160	368	8.8	(7.0-10.6)
Cash Assistance ^e	1,128	212	14.0	(10.3-17.7)
Pre-First Steps (FS) Medicaid Onlyf	1,249	121	8.4	(5.9-10.9)
First Steps Expansion ⁹	783	35	2.9	(1.1-4.7)
Non-Medicaid ^h	2,808	60	1.2	(0.6-1.8)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	35	6.7	(2.2-11.2)
Normal Birth Weight (≥2500 g)	5,616	395	4.2	(3.4-5.0)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =50. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^{°10%} or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

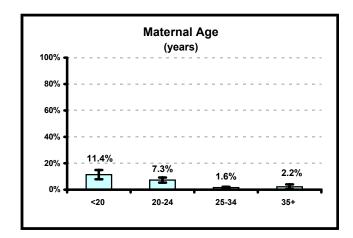
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

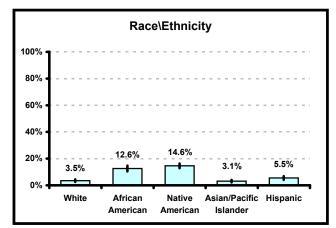
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

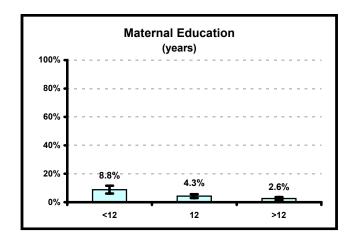
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

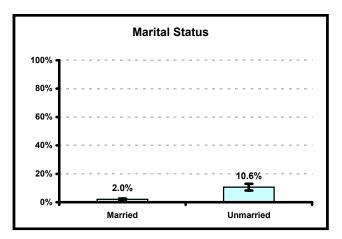
^hNon-Medicaid - women not enrolled in Medicaid.

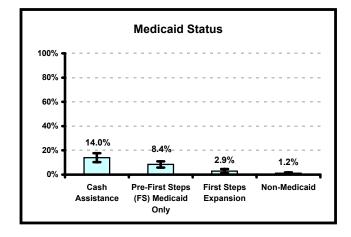
Figure 5.10: Women who reported that during the 12 months before delivering their new baby, they were involved in a physical fight.

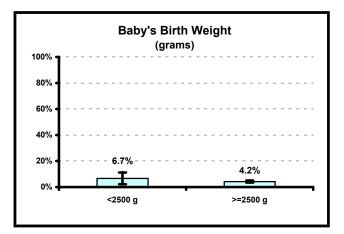












Survey Question 30:

This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

k. You or your husband or partner went to jail

No (94.7%)

Yes (5.3%)

Summary of Results:

Mother or Husband or Partner Went to Jail during the 12 Months before Delivery (Table 5.11 & Figure 5.11)

- ☐ The proportion of women who said they or their husband or partner went to jail during the 12 months before delivering their new baby was 5.3 percent. These women were more likely to be:
 - Teenagers
 - Women with less than a high school education
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- □ Native American women (16.0%) were more likely to report that they or their husband or partner went to jail during the 12 months before delivering their new baby compared to Asian/Pacific Islander women (2.4%), White women (4.7%), and Hispanic women (5.5%).
- ☐ Women who said that they or their husband went to jail during the 12 months prior to delivering their new baby did not differ by the infant's birth weight status.

Table 5.11: Women who reported that during the 12 months before delivering their new baby, they or their husband or partner went to jail. Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,983)	(n= 456)	(%= 5.3)	(4.3-6.3)
Maternal Age				
<20 years	1,007	147	14.9	(10.8-19.0)
20-24 years	1,545	158	8.2	(5.8-10.6)
25-34 years	2,856	131	2.1	(1.3-2.9)
35+ years	574	20	2.3	(0.5-4.1)
Race/Ethnicity				
White	1,404	60	4.7	(3.5-5.9)
African American	961	123	13.7	(11.5-15.9)
Native American	1,239	184	16.0	(14.0-18.0)
Asian/Pacific Islander	1,200	27	2.4	(1.6-3.2)
Hispanic	1,179	62	5.5	(4.1-6.9)
Maternal Education ^c				
<12 years	1,300	159	13.1	(9.6-16.6)
12 years	1,704	151	5.2	(3.6-6.8)
>12 years	2,322	84	2.5	(1.5-3.5)
Marital Status				
Married	3,817	114	2.0	(1.4-2.6)
Unmarried	2,155	340	13.9	(11.2-16.6)
Medicaid Status				
Medicaid ^d	3,161	402	11.4	(9.4-13.4)
Cash Assistance ^e	1,125	247	21.9	(17.2-26.6)
Pre-First Steps (FS) Medicaid Only ^f	1,249	119	8.1	(5.6-10.6)
First Steps Expansion ⁹	787	36	3.7	(1.5-5.9)
Non-Medicaid ^h	2,806	54	1.2	(0.6-1.8)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	351	39	6.3	(2.0-10.6)
Normal Birth Weight (>2500 g)	5,617	416	5.2	(4.2-6.2)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =51. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

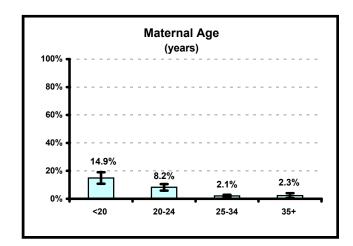
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

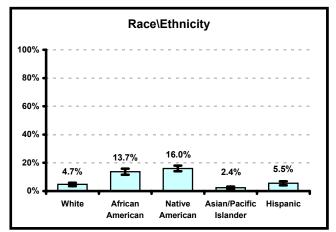
¹Pre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

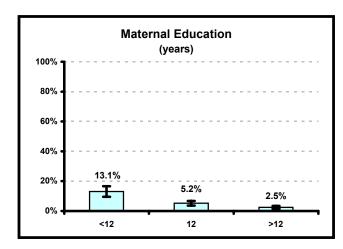
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

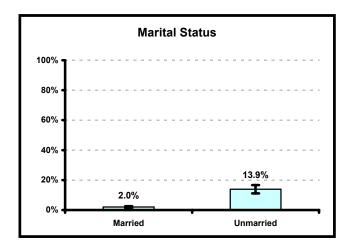
^hNon-Medicaid - women not enrolled in Medicaid.

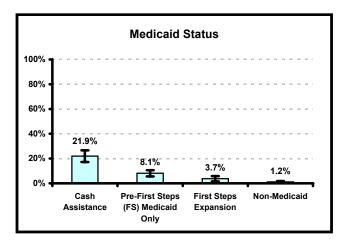
Figure 5.11: Women who reported that during the 12 months before delivering their new baby, they or their husband or partner went to jail.

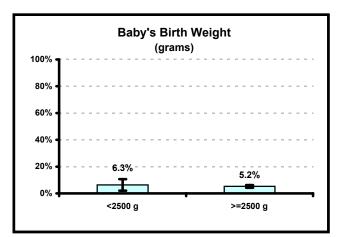












Survey Question 30:

This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

1. Someone very close to you had a bad problem with drinking or drugs

No (83.5%)

Yes (16.5%)

Summary of Results:

Someone Close Had a Drinking or Drug Problem during the 12 Months before Delivery (Table 5.12 & Figure 5.12)

- ☐ The proportion of women said they had someone very close to them with a drinking or drug problem during the 12 months before delivering their new baby was 16.5 percent. These women were more likely to be:
 - > Native American
 - Unmarried
 - Medicaid recipients (specifically Cash Assistance)
- ☐ Significantly more teenagers (29.5%) reported they had someone close to them with a problem with drugs or drinking during the 12 months before delivering their new baby than women aged 25 to 34 years (10.5%) or women 35 years or older (14.5%).
- □ Women with less than a high school education (23.0%) were two times more likely to report they had someone close to them with a drug or alcohol problem during the 12 months before delivering their new baby compared to women who had more than a high school education (10.9%).
- ☐ The proportion of women who said they had someone very close to them who had a drinking or drug problem and had an infant weighing less than 2500 grams at birth did not significantly differ from those who delivered an infant of normal weight (≥ 2500 grams).

Table 5.12: Women who reported that during the 12 months before delivering their new baby, someone very close to them had a bad problem with drinking or drugs.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,990)	(n= 1,130)	(%= 16.5)	(14.9-18.1)
Maternal Age				
<20 years	1,012	288	29.5	(24.4-34.6)
20-24 years	1,544	370	23.1	(19.6-26.6)
25-34 years	2,859	392	10.5	(8.7-12.3)
35+ years	574	79	14.5	(10.0-19.0)
Race/Ethnicity				
White	1,404	239	17.5	(15.5-19.5)
African American	962	178	19.4	(16.9-21.9)
Native American	1,246	515	42.5	(40.1-44.9)
Asian/Pacific Islander	1,201	82	6.8	(5.4-8.2)
Hispanic	1,177	116	9.9	(8.1-11.7)
Maternal Education ^c				
<12 years	1,304	322	23.0	(18.7-27.3)
12 years	1,708	388	20.2	(17.1-23.3)
>12 years	2,321	306	10.9	(8.9-12.9)
Marital Status				
Married	3,816	456	10.8	(9.2-12.4)
Unmarried	2,163	670	31.8	(28.1-35.5)
Medicaid Status				
Medicaid ^d	3,168	807	23.7	(21.0-26.4)
Cash Assistance ^e	1,129	431	36.1	(30.6-41.6)
Pre-First Steps (FS) Medicaid Onlyf	1,254	241	19.0	(15.1-22.9)
First Steps Expansion ⁹	785	135	15.8	(11.5-20.1)
Non-Medicaid ^h	2,806	320	11.7	(9.9-13.5)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	354	82	18.6	(11.5-25.7)
Normal Birth Weight (≥2500 g)	5,621	1,047	16.4	(14.8-18.0)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =44. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

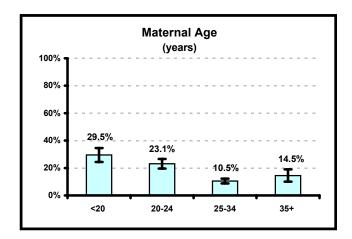
 $^{^{\}mathrm{e}}$ Cash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

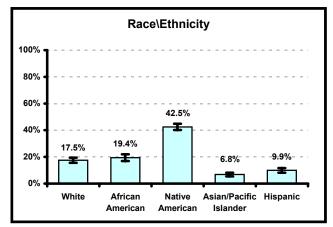
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

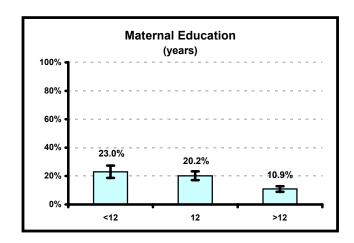
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

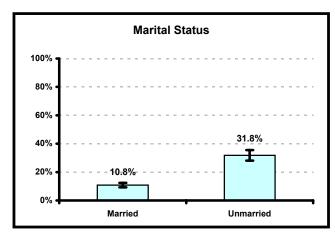
ⁿNon-Medicaid - women not enrolled in Medicaid.

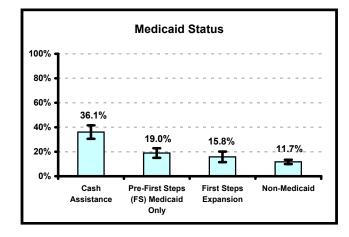
Figure 5.12: Women who reported that during the 12 months before delivering their new baby, someone very close to them had a bad problem with drinking or drugs.

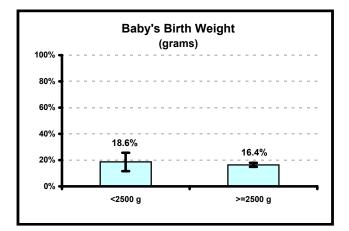












Survey Question 30:

This question is about things that may have happened during the 12 months before you delivered your new baby. This includes the months before you got pregnant. For each thing, circle Y (Yes) if it happened to you or N (No) if it did not. It may help to use the calendar.

m. Someone very close to you died

No (82.3%)

Yes (17.7%)

Summary of Results:

Someone Close Died during the 12 Months before Delivery (Table 5.13 & Figure 5.13)

- Almost twenty percent (17.7%) reported they had someone close to them died during the 12 months before delivering their new baby. These women were more likely to be:
 - > Native American
 - ➤ Unmarried
- Teenagers (24.2%) were more likely to report that they had someone close to them die during the 12 months prior to delivering their new baby compared to women aged 25 to 34 (16.0%).
- ☐ There was no significant relationship between women who reported they had someone very close to them die during the 12 months before delivering their new baby marital status, Medicaid status, or the infant's birth weight status.

Table 5.13: Women who reported that during the 12 months before delivering their new baby, someone very close to them died. Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yesb	95% CI
Characteristics ^a	(n= 5,990)	(n= 1,138)	(%= 17.7)	(16.1-19.3)
Maternal Age				
<20 years	1,011	256	24.2	(19.5-28.9)
20-24 years	1,543	300	18.8	(15.5-22.1)
25-34 years	2,861	497	16.0	(14.0-18.0)
35+ years	574	85	15.4	(10.9-19.9)
Race/Ethnicity				
White	1,406	251	18.0	(16.0-20.0)
African American	962	202	22.2	(19.7-24.7)
Native American	1,241	360	29.3	(27.1-31.5)
Asian/Pacific Islander	1,200	149	12.4	(10.6-14.2)
Hispanic	1,181	176	14.9	(12.9-16.9)
Maternal Education ^c				
<12 years	1,304	277	19.4	(15.7-23.1)
12 years	1,707	344	18.3	(15.4-21.2)
>12 years	2,320	393	16.5	(14.1-18.9)
Marital Status				
Married	3,820	632	16.2	(14.4-18.0)
Unmarried	2,159	502	21.5	(18.4-24.6)
Medicaid Status				
Medicaid ^d	3,166	657	18.3	(15.9-20.7)
Cash Assistance ^e	1,128	296	22.6	(18.1-27.1)
Pre-First Steps (FS) Medicaid Onlyf	1,250	226	17.2	(13.7-20.7)
First Steps Expansion ⁹	788	135	14.6	(10.7-18.5)
Non-Medicaid ^h	2,808	477	17.3	(15.3-19.3)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	352	69	22.1	(14.3-29.9)
Normal Birth Weight (≥2500 g)	5,623	1,069	17.5	(15.9-19.1)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database Missing responses =44. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

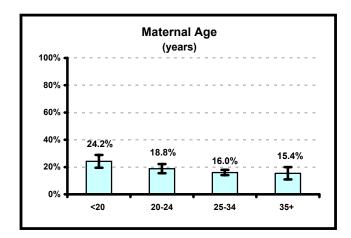
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

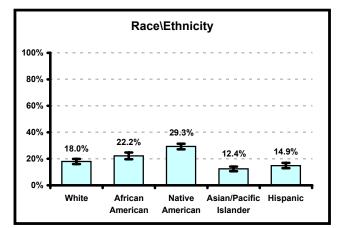
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

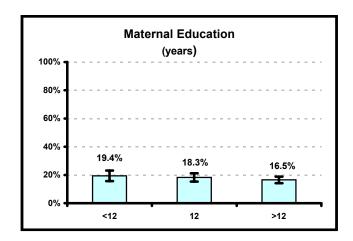
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

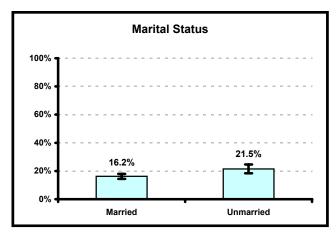
ⁿNon-Medicaid - women not enrolled in Medicaid.

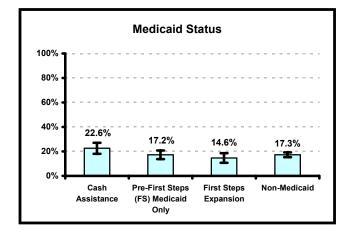
Figure 5.13: Women who reported that during the 12 months before delivering their new baby, someone very close to them died.

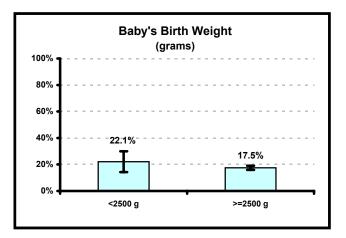












Survey Question 57:

During your most recent pregnancy, would you have had the kinds of help listed below if you needed them? For each thing, circle Y (Yes) if you would have had this kind of help or N (No) if you would not have had this kind of help.

a. Someone to loan me \$50

No (15.4%)

Yes (84.6%)

Summary of Results:

Someone to Loan Mother \$50 during the Most Recent Pregnancy (Table 5.14 & Figure 5.14)

- ☐ The proportion of women who said they would have someone to loan them \$50 during their most recent pregnancy was 84.6 percent. These women were more likely to be:
 - ➤ Women 35 years or older
 - ➤ White
 - Married
 - ➤ Non-Medicaid recipients
- ☐ There was no significant difference between women who said they would have had someone to loan them \$50 during their most recent pregnancy and the birth weight status of their newborn.

Table 5.14: Women who reported that during their most recent pregnancy they would have had someone to loan them \$50.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,918)	(n= 4,647) (%	%= 84.6)	(83.2-86.0)
Maternal Age				
<20 years	999	765	76.7	(72.0-81.4)
20-24 years	1,532	1,183	81.3	(78.2-84.4)
25-34 years	2,820	2,241	87.7	(86.1-89.3)
35+ years	566	457	86.8	(82.9-90.7)
Race/Ethnicity				
White	1,403	1,242	88.0	(86.2-89.8)
African American	950	739	76.8	(74.3-79.3)
Native American	1,240	978	77.6	(75.4-79.8)
Asian/Pacific Islander	1,181	793	65.5	(62.8-68.2)
Hispanic	1,144	895	78.0	(75.6-80.4)
Maternal Education ^c				
<12 years	1,277	904	69.9	(65.6-74.2)
12 years	1,688	1,331	84.6	(82.1-87.1)
>12 years	2,308	1,949	90.0	(88.2-91.8)
Marital Status				
Married	3,766	3,048	88.0	(86.6-89.4)
Unmarried	2,142	1,592	75.8	(72.7-78.9)
Medicaid Status				
Medicaid ^d	3,119	2,248	75.5	(73.0-78.0)
Cash Assistance ^e	1,114	748	70.4	(65.3-75.5)
Pre-First Steps (FS) Medicaid Only ^f	1,226	898	75.6	(71.7-79.5)
First Steps Expansion ⁹	779	602	81.4	(77.3-85.5)
Non-Medicaid ^h	2,783	2,387	90.8	(89.4-92.2)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	344	252	77.5	(70.2-84.8)
Normal Birth Weight (<u>></u> 2500 g)	5,559	4,384	85.0	(83.6-86.4)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =116. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

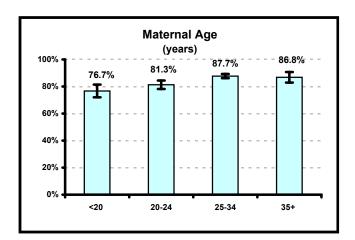
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

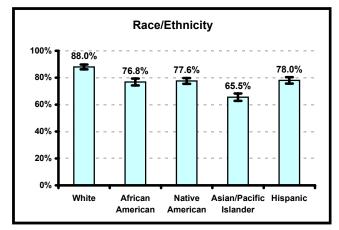
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

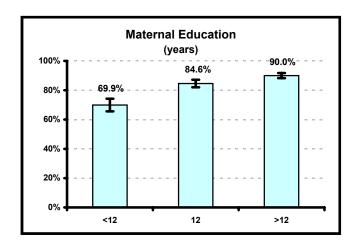
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

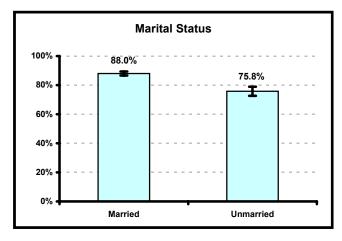
^hNon-Medicaid - women not enrolled in Medicaid.

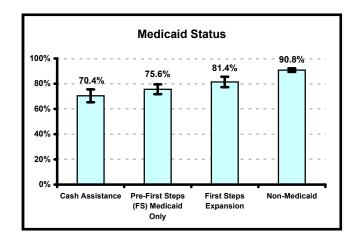
Figure 5.14: Women who reported that during their most recent pregnancy they would have had someone to loan them \$50.

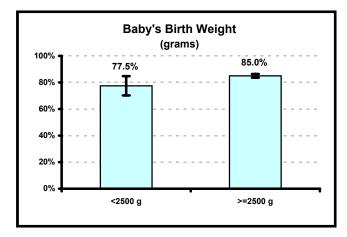












Survey Question 57:

During your most recent pregnancy, would you have had the kinds of help listed below if you needed them? For each thing, circle Y (Yes) if you would have had this kind of help or N (No) if you would not have had this kind of help.

b. Someone to help me if I were sick and needed to be in bed

No (12.3%)

Yes (87.7%)

Summary of Results:

Someone to Help if Sick during the Most Recent Pregnancy (Table 5.15 & Figure 5.15)

- Nearly ninety percent (87.7%) of women said they would have someone to help them if they were sick and needed to be in bed during their most recent pregnancy. These women were more likely to be:
 White
 Married
 Non-Medicaid recipients
 Women aged 25 to 34 years (89.8%) were more likely to report they would had had someone to help them if they were sick and needed to be in bed during their most recent pregnancy compared to women aged 20 to 24 years (82.7%).
 The PRAMS data show that women who were educated beyond high school (91.3%) were
- sick and needed to be in bed compared to those with less than a high school degree (78.4%).

 There was no association between women who said they would have had someone to help

significantly more likely to report they would have had someone to help them if they were

☐ There was no association between women who said they would have had someone to help them if they were sick and needed to be in bed and their infant's birth weight status.

Table 5.15: Women who reported that during their most recent pregnancy they would have had someone to help them if they were sick and needed to be in bed.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,947)	(n= 5,030)	(%= 87.7)	(86.5-88.9)
Maternal Age				
<20 years	1,002	858	87.3	(84.0-90.6)
20-24 years	1,535	1,254	82.7	(79.8-85.6)
25-34 years	2,831	2,414	89.8	(88.2-91.4)
35+ years	578	503	88.3	(84.4-92.2)
Race/Ethnicity				
White	1,401	1,267	90.2	(88.6-91.8)
African American	951	818	85.7	(83.5-87.9)
Native American	1,240	1,069	85.4	(83.6-87.2)
Asian/Pacific Islander	1,195	993	82.4	(80.2-84.6)
Hispanic	1,160	883	75.8	(73.4-78.2)
Maternal Education ^c				
<12 years	1,293	1,019	78.4	(74.7-82.1)
12 years	1,690	1,430	87.7	(85.3-90.1)
>12 years	2,316	2,065	91.3	(89.5-93.1)
Marital Status				
Married	3,790	3,247	89.5	(88.1-90.9)
Unmarried	2,147	1,774	82.7	(80.0-85.4)
Medicaid Status				
Medicaid ^d	3,137	2,491	79.5	(77.1-81.9)
Cash Assistance ^e	1,113	882	79.3	(74.8-83.8)
Pre-First Steps (FS) Medicaid Onlyf	1,236	972	79.0	(75.5-82.5)
First Steps Expansion ⁹	788	637	80.5	(76.2-84.8)
Non-Medicaid ^h	2,794	2,527	93.2	(91.8-94.6)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	346	288	84.8	(78.3-91.3)
Normal Birth Weight (≥2500 g)	5,586	4,730	87.8	(86.6-89.0)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =87. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

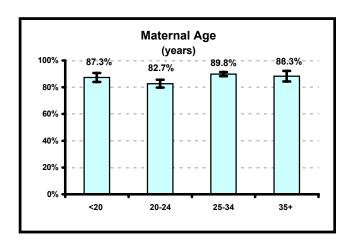
 $^{^{\}mathrm{e}}$ Cash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

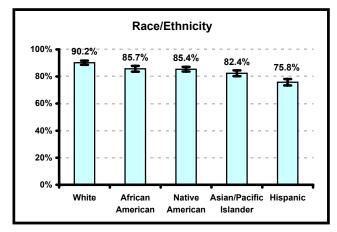
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

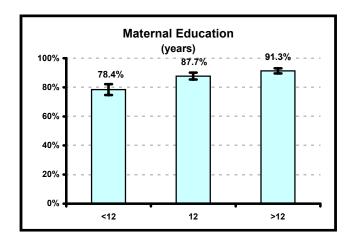
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

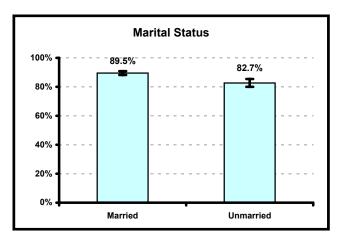
ⁿNon-Medicaid - women not enrolled in Medicaid.

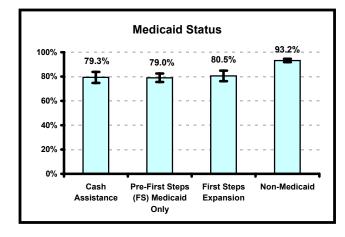
Figure 5.15: Women who reported that during their most recent pregnancy they would have had someone to help them if they were sick and needed to be in bed.

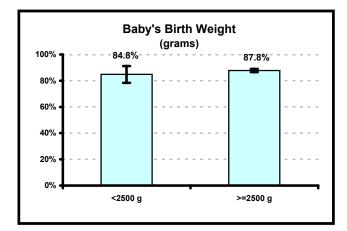












Survey Question 57:

During your most recent pregnancy, would you have had the kinds of help listed below if you needed them? For each thing, circle Y (Yes) if you would have had this kind of help or N (No) if you would not have had this kind of help.

c. Someone to take me to the clinic or doctor's office if I needed a ride

No (7.5%) Yes (92.5%)

Summary of Results:

Someone to Give Ride to Doctor's Office during the Most Recent Pregnancy (Table 5.16 & Figure 5.16)

Over ninety percent (92.5%) of women said they would have had someone to give them a ride to the clinic or doctor's office if they needed a ride during the most recent pregnancy. These women were more likely to be:
> White
Married
Non-Medicaid recipients
Teenagers (94.4%) were significantly more likely to report they would have had someone to give them a ride to the clinic or doctor's office they needed a ride during their most recent pregnancy compared to women aged 20 to 24 years (89.7%).
Women who were educated beyond high school (93.9%) were significantly more likely to report they would have had someone to help them if they needed a ride compared to those with less than a high school degree (88.6%).

☐ Infant birth weight status was not associated with women's report of having had someone to give them a ride to the clinic or doctor's office if they needed a ride during the most recent

pregnancy.

Table 5.16: Women who reported that during their most recent pregnancy they would have had someone to take them to the clinic or doctor's office if they needed a ride.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,939)	(n= 5,294)	(%= 92.5)	(91.5-93.5)
Maternal Age				
<20 years	1,003	921	94.4	(92.2-96.6)
20-24 years	1,530	1,330	89.7	(87.3-92.1)
25-34 years	2,832	2,528	93.7	(92.5-94.9)
35+ years	573	514	90.2	(86.5-93.9)
Race/Ethnicity				
White	1,404	1,328	94.5	(93.3-95.7)
African American	951	825	86.2	(84.0-88.4)
Native American	1,240	1,113	89.2	(87.6-90.8)
Asian/Pacific Islander	1,189	1,037	86.7	(84.7-88.7)
Hispanic	1,155	991	85.8	(83.8-87.8)
Maternal Education ^c				
<12 years	1,286	1,118	88.6	(86.1-91.1)
12 years	1,691	1,508	93.0	(91.2-94.8)
>12 years	2,317	2,114	93.9	(92.5-95.3)
Marital Status				
Married	3,781	3,396	93.5	(92.5-94.5)
Unmarried	2,148	1,889	89.9	(87.7-92.1)
Medicaid Status				
Medicaid ^d	3,134	2,693	88.4	(86.6-90.2)
Cash Assistance ^e	1,114	947	88.5	(85.2-91.8)
Pre-First Steps (FS) Medicaid Onlyf	1,235	1,069	89.4	(87.0-91.8)
First Steps Expansion ⁹	785	677	86.7	(83.2-90.2)
Non-Medicaid ^h	2,789	2,589	95.4	(94.4-96.4)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	346	301	90.4	(85.9-94.9)
Normal Birth Weight (>2500 g)	5,578	4,980	92.6	(91.6-93.6)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

 $birth\ certificates; and\ Medicaid\ status\ from\ linkage\ with\ Washington\ State\ First\ Steps\ Database.$

Missing responses =16. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the maternal education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

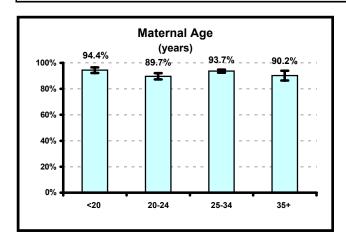
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

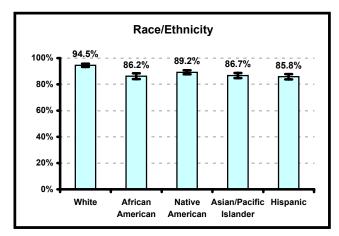
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

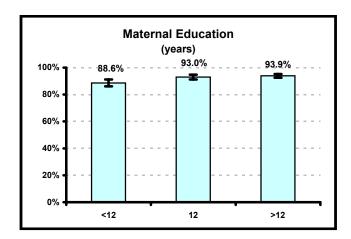
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups. poverty level,

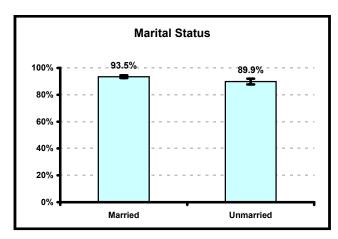
[&]quot;Non-Medicaid - women not enrolled in Medicaid.

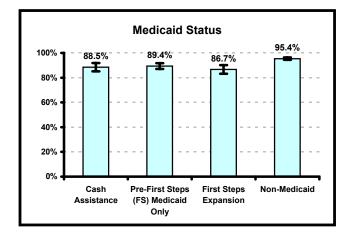
Figure 5.16: Women who reported that during their most recent pregnancy they would have had someone to take them to the clinic or doctor's office if they needed a ride.

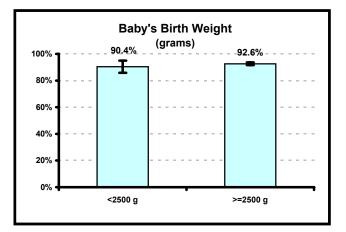












Survey Question 57:

During your most recent pregnancy, would you have had the kinds of help listed below if you needed them? For each thing, circle Y (Yes) if you would have had this kind of help or N (No) if you would not have had this kind of help.

d. Someone to talk with about my problems

No (9.7) Yes (90.3%)

Summary of Results:

Someone to Talk to about Problems during the Most Recent Pregnancy (Table 5.17 & Figure 5.17)

- Approximately 90.3 percent of women said they would have had someone to talk with about their problems during their most recent pregnancy. These women were more likely to be:
 - ➤ White
 - ➤ Women with more than a high school education
 - Married
 - ➤ Non-Medicaid recipients
- ☐ An estimated 92.3 percent of women aged 25 to 34 said they would have had someone to talk to about their problems during their most recent pregnancy. This proportion is significantly higher than for teenagers (87.3%) and women aged 20 to 24 (87.8%).
- ☐ There was no significant association between women who reported they would have had someone to talk with about their problems during their most recent pregnancy and the infant's birth weight status.

Table 5.17: Women who reported that during their most recent pregnancy they would have had someone to talk with about their problems.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,947)	(n= 5,129)	(%= 90.3)	(89.1-91.5)
Maternal Age				
<20 years	1,002	845	87.3	(84.0-90.6)
20-24 years	1,535	1,293	87.8	(85.3-90.3)
25-34 years	2,835	2,485	92.3	(90.9-93.7)
35+ years	574	505	90.0	(86.5-93.5)
Race/Ethnicity				
White	1,403	1,304	92.8	(91.4-94.2)
African American	950	823	86.0	(83.8-88.2)
Native American	1,239	1,048	83.7	(81.9-85.5)
Asian/Pacific Islander	1,193	1,005	83.6	(81.4-85.8)
Hispanic	1,162	949	81.5	(79.3-83.7)
Maternal Education ^c				
<12 years	1,294	1,045	83.0	(79.7-86.3)
12 years	1,690	1,447	89.4	(87.2-91.6)
>12 years	2,317	2,104	93.9	(92.5-95.3)
Marital Status				
Married	3,783	3,327	92.4	(91.2-93.6)
Unmarried	2,154	1,793	84.8	(82.3-87.3)
Medicaid Status				
Medicaid ^d	3,139	2,557	84.6	(82.6-86.6)
Cash Assistance ^e	1,119	896	82.2	(78.1-86.3)
Pre-First Steps (FS) Medicaid Onlyf	1,236	1,012	86.5	(83.8-89.2)
First Steps Expansion ⁹	784	649	84.6	(80.9-88.3)
Non-Medicaid ^h	2,792	2,560	94.3	(93.1-95.5)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	348	295	88.6	(83.5-93.7)
Normal Birth Weight (≥2500 g)	5,584	4,822	90.4	(89.2-91.6)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =87. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^{°10%} or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

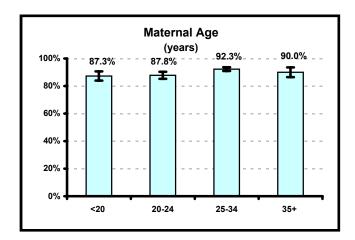
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

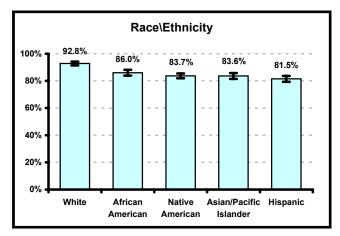
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

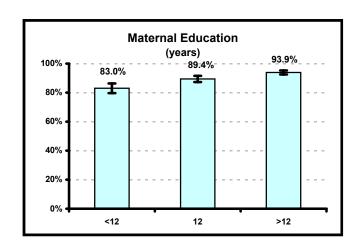
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

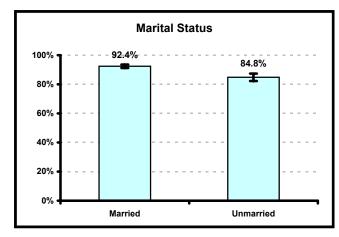
ⁿNon-Medicaid - women not enrolled in Medicaid.

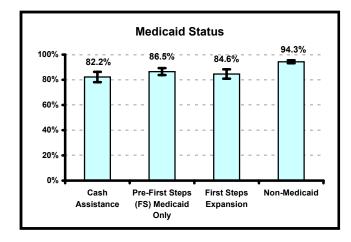
Figure 5.17: Women who reported that during their most recent pregnancy, they would have had someone to talk with about their problems.

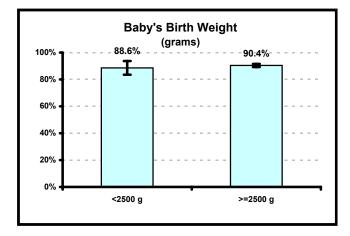












Survey Question 58:

During your most recent pregnancy, who would have helped you if a problem had come up? (For example, who would have helped you if you needed to borrow \$50 or it you got sick and had to be in bed for several weeks?). **Check all that apply.**

a. My husband or partner

No (17.3%)

Yes (82.7%)

Summary of Results:

Husband or Partner Would Help with a Problem during the Most Recent Pregnancy (Table 5.18 & Figure 5.18)

- ☐ The proportion of women who reported their husband or partner would have helped them if a problem had come up during their most recent pregnancy was 82.7%. These women were more likely to be:
 - ➤ Women with more than a high school education
 - Married
 - Non-Medicaid recipients
- ☐ According to the 1996-1998 PRAMS data, women aged 35 years or older (89.2%) were significantly more likely to report their husband or partner would have helped them if a problem had come up during their most recent pregnancy compared to teenagers (66.8%) and women aged 20 to 24 years (78.2%).
- Asian/Pacific Islander women (86.4%) were significantly more likely to report their husband or partner would have helped them if a problem had come up during their most recent pregnancy compared to Native American women (67.2%), African American women (68.5%), or Hispanic women (74.7%).
- ☐ Women's report that their husband or partner would have helped them if a problem had come up during their most recent pregnancy was not significantly associated with the infant's birth weight status.

Table 5.18: Women who reported that during their most recent pregnancy, their husband or partner would have helped them if a problem had come up.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 6,018)	(n= 4,688)	(%= 82.7)	(81.1-84.3)
Maternal Age				
<20 years	1,018	638	66.8	(61.7-71.9)
20-24 years	1,553	1,156	78.2	(74.9-81.5)
25-34 years	2,867	2,403	87.6	(85.8-89.4)
35+ years	579	491	89.2	(85.7-92.7)
Race/Ethnicity				
White	1,410	1,204	84.8	(82.8-86.8)
African American	964	675	68.5	(65.6-71.4)
Native American	1,247	862	67.2	(64.8-69.6)
Asian/Pacific Islander	1,204	1,049	86.4	(84.4-88.4)
Hispanic	1,193	898	74.7	(72.2-77.2)
Maternal Education ^c				
<12 years	1,321	871	68.9	(64.6-73.2)
12 years	1,710	1,281	78.5	(75.6-81.4)
>12 years	2,328	2,038	90.6	(88.8-92.4)
Marital Status				
Married	3,836	3,421	91.2	(89.8-92.6)
Unmarried	2,171	1,260	60.1	(56.4-63.8)
Medicaid Status				
Medicaid ^d	3,188	2,138	69.3	(66.6-72.0)
Cash Assistance ^e	1,131	585	53.3	(47.8-58.8)
Pre-First Steps (FS) Medicaid Only ^f	1,261	909	74.9	(71.2-78.6)
First Steps Expansion ^g	796	644	80.4	(75.9-84.9)
Non-Medicaid ^h	2,814	2,544	92.0	(90.6-93.4)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	253	76.2	(68.6-83.8)
Normal Birth Weight (<u>></u> 2500 g)	5,651	4,422	83.0	(81.4-84.6)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

 $[\]label{eq:missing} \textit{Missing responses =16. CI = Confidence Interval. White includes other/unknown (3.5\%)}.$

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

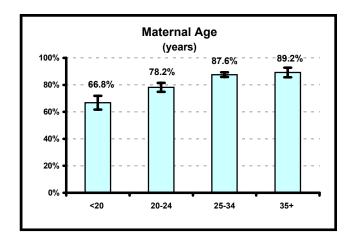
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

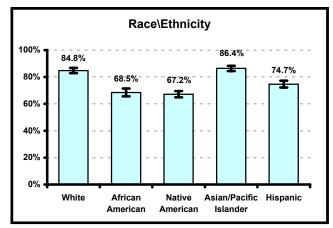
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

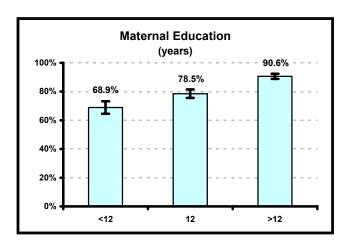
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

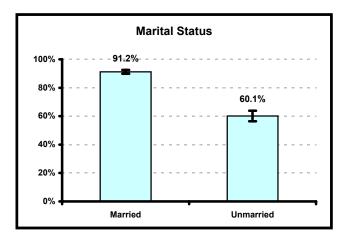
ⁿNon-Medicaid - women not enrolled in Medicaid.

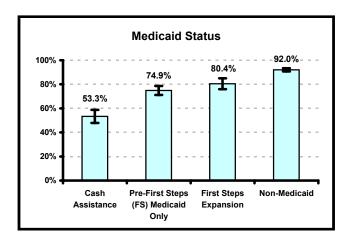
Figure 5.18: Women who reported that during their most recent pregnancy, their husband or partner would have helped them if a problem had come up. Washington State PRAMS 1996-1998

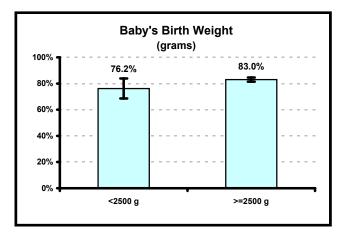












Survey Question 58:

During your most recent pregnancy, who would have helped you if a problem had come up? (For example, who would have helped you if you needed to borrow \$50 or it you got sick and had to be in bed for several weeks?). **Check all that apply.**

b. My mother, father, or in-laws

No (22.3%)

Yes (77.7%)

Summary of Results:

Mother's Parents or In-Laws Would Help with a Problem during the Most Recent Pregnancy (Table 5.19 & Figure 5.19)

- ☐ Around three-fourths (77.7%) of women said their parents or in-laws would have helped them if a problem had come up during their most recent pregnancy. These women were more likely to be:
 - ➤ White
 - ➤ Women with more than a high school education
 - Married
 - ➤ Non-Medicaid recipients
- ☐ Teenagers (81.7%) were more likely to report their parents or in-laws would have helped them if a problem had come up during their most recent pregnancy than women aged 35 years or older (70.3%) and women aged 20 to 24 (74.0%).
- Asian/Pacific Islander women (86.4%) were more likely to report their parents or in-laws would have helped them if a problem had come up during their most recent pregnancy compared to Native American women (67.2%), African American women (68.5%), and Hispanic women (74.7%).
- ☐ There was no significant association between women's report that their parents or in-laws would have helped them if a problem had come up during their most recent pregnancy and the infant's birth weight status.

Table 5.19: Women who reported that during their most recent pregnancy, their mother, father, or in-laws would have helped them if a problem had come up.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 6,024)	(n= 4,159)	(%= 77.7)	(76.1-79.3)
Maternal Age				
<20 years	1,021	790	81.7	(78.0-85.4)
20-24 years	1,554	1,051	74.0	(70.7-77.3)
25-34 years	2,869	1,954	79.8	(77.8-81.8)
35+ years	579	363	70.3	(64.8-75.8)
Race/Ethnicity				
White	1,410	1,191	84.2	(82.2-86.2)
African American	965	644	66.3	(63.4-69.2)
Native American	1,250	960	75.8	(73.6-78.0)
Asian/Pacific Islander	1,204	745	61.0	(58.3-63.7)
Hispanic	1,195	619	51.4	(48.7-54.1)
Maternal Education ^c				
<12 years	1,321	757	60.6	(56.3-64.9)
12 years	1,713	1,208	77.3	(74.4-80.2)
>12 years	2,329	1,802	85.0	(83.0-87.0)
Marital Status				
Married	3,837	2,687	80.3	(78.5-82.1)
Unmarried	2,176	1,464	71.2	(68.1-74.3)
Medicaid Status				
Medicaid ^d	3,192	1,952	66.9	(64.4-69.4)
Cash Assistance ^e	1,132	735	70.1	(65.2-75.0)
Pre-First Steps (FS) Medicaid Onlyf	1,263	736	64.6	(60.7-68.5)
First Steps Expansion ⁹	797	481	66.6	(61.7-71.5)
Non-Medicaid ^h	2,816	2,198	85.3	(83.5-87.1)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	226	71.4	(63.8-79.0)
Normal Birth Weight (≥2500 g)	5,656	3,923	78.1	(76.5-79.7)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =10. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^{°10%} or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

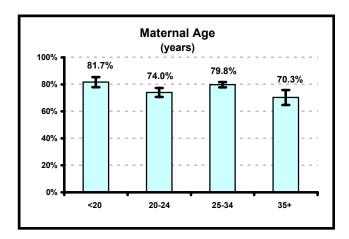
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

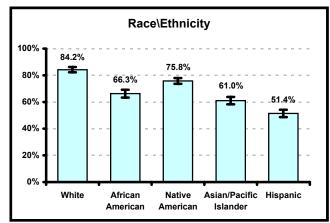
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

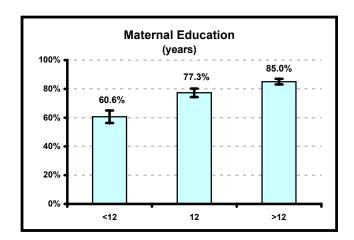
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

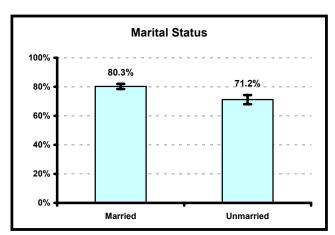
ⁿNon-Medicaid - women not enrolled in Medicaid.

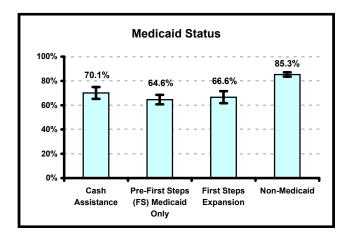
Figure 5.19: Women who reported that during their most recent pregnancy, their mother, father, or in-laws would have helped them if a problem had come up.

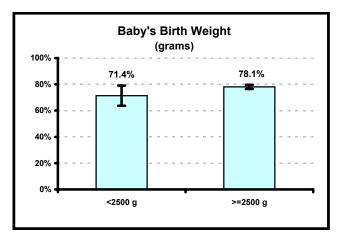












Survey Question 58:

During your most recent pregnancy, who would have helped you if a problem had come up? (For example, who would have helped you if you needed to borrow \$50 or it you got sick and had to be in bed for several weeks?). **Check all that apply.**

c. Other family member or relative

No (36.9%) Yes (63.1%)

Summary of Results:

Other Family Members or Relatives Would Help with a Problem during the Most Recent Pregnancy (Table 5.20 & Figure 5.20)

- ☐ An estimated 63.1 percent of women said other family members or relatives would have helped them if a problem had come up during their most recent pregnancy. These women were more likely to be:
 - ➤ White
 - ➤ Women with more than a high school education
 - Married
 - ➤ Non-Medicaid recipients
- □ Women aged 25 to 34 (67.2%) were more likely to report that other family members or relatives would have helped them if a problem had come up during their most recent pregnancy compared to women aged 20 to 24 (58.3%) and women less than 20 years of age (58.4%).
- ☐ The infant's birth weight status was not significantly associated with women's report that other family members or relatives would have helped them if a problem had come up during their most recent pregnancy.

Table 5.20: Women who reported that during their most recent pregnancy, a family member or relative would have helped them if a problem had come up.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 6,022)	(n= 3,475)	(%= 63.1)	(61.1-65.1)
Maternal Age				
<20 years	1,020	574	58.4	(53.1-63.7)
20-24 years	1,555	863	58.3	(54.4-62.2)
25-34 years	2,867	1,702	67.2	(64.7-69.7)
35+ years	579	335	59.4	(53.3-65.5)
Race/Ethnicity				
White	1,410	950	67.1	(64.6-69.6)
African American	965	555	56.4	(53.5-59.3)
Native American	1,250	766	60.4	(58.0-62.8)
Asian/Pacific Islander	1,205	641	52.6	(49.9-55.3)
Hispanic	1,192	563	47.3	(44.6-50.0)
Maternal Education ^c				
<12 years	1,320	641	49.6	(44.9-54.3)
12 years	1,712	1,001	61.1	(57.6-64.6)
>12 years	2,329	1,502	70.1	(67.4-72.8)
Marital Status				
Married	3,836	2,263	65.3	(63.1-67.5)
Unmarried	2,175	1,207	57.3	(53.6-61.0)
Medicaid Status				
Medicaid ^d	3,191	1,635	52.7	(49.8-55.6)
Cash Assistance ^e	1,132	584	51.3	(45.8-56.8)
Pre-First Steps (FS) Medicaid Onlyf	1,262	625	52.3	(47.8-56.8)
First Steps Expansion ^g	797	426	55.0	(49.5-60.5)
Non-Medicaid ^h	2,815	1,832	70.3	(67.9-72.7)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	191	56.3	(47.5-65.1)
Normal Birth Weight (≥2500 g)	5,654	3,274	63.5	(61.5-65.5)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =12. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^{°10%} or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

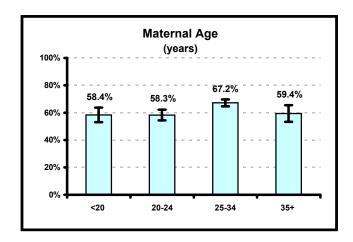
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

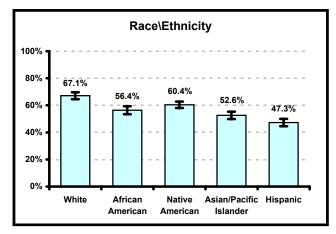
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

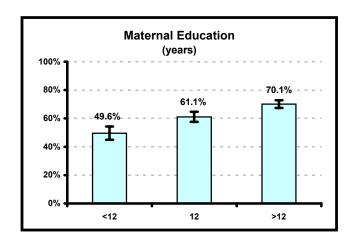
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

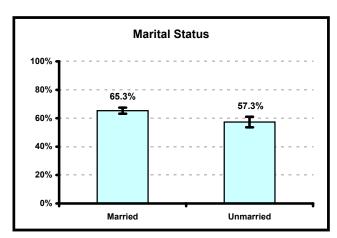
ⁿNon-Medicaid - women not enrolled in Medicaid.

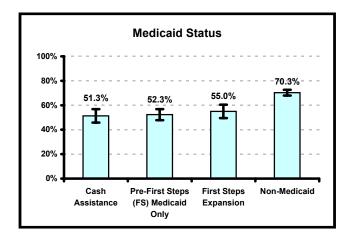
Figure 5.20: Women who reported that during their most recent pregnancy, a family member or relative would have helped them if a problem had come up. Washington State PRAMS 1996-1998

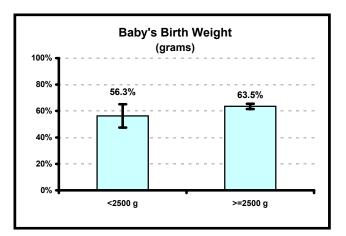












Survey Question 58:

During your most recent pregnancy, who would have helped you if a problem had come up? (For example, who would have helped you if you needed to borrow \$50 or it you got sick and had to be in bed for several weeks?). **Check all that apply.**

d. Friend

No (34.7%) Yes (65.3%)

Summary of Results:

Friend Would Help with a Problem during the Most Recent Pregnancy (Table 5.21 & Figure 5.21)

- ☐ The proportion of women who said a friend would have helped them if a problem had come up during their most recent pregnancy was 65.3 percent. These women were more likely to be:
 - ➤ White
 - ➤ Women with more than a high school education
 - Married
 - ➤ Non-Medicaid recipients
- ☐ Almost three-fourths (74.1%) of women 35 year or older said a friend would have helped them if a problem had come up during their most recent pregnancy compared to teenagers (53.6%) and women 20 to 24 years (57.5%).
- ☐ There was no association between the infant's birth weight status and women's report that a friend would have helped them if a problem had come up during their most recent pregnancy.

Table 5.21: Women who reported that during their most recent pregnancy, a friend would have helped them if a problem had come up. Washington State PRAMS 1996-1998

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 6,020)	(n= 3,467)	(%= 65.3)	(63.5-67.1)
Maternal Age				
<20 years	1,021	515	53.6	(48.3-58.9)
20-24 years	1,554	817	57.5	(53.6-61.4)
25-34 years	2,865	1,754	70.1	(67.6-72.6)
35+ years	579	381	74.1	(69.0-79.2)
Race/Ethnicity				
White	1,410	1,005	70.6	(68.2-73.0)
African American	964	596	61.0	(58.1-63.9)
Native American	1,250	705	55.0	(52.5-57.5)
Asian/Pacific Islander	1,205	643	52.4	(49.7-55.1)
Hispanic	1,191	518	43.0	(40.3-45.7)
Maternal Education ^c				
<12 years	1,321	570	44.5	(39.8-49.2)
12 years	1,712	969	62.7	(59.2-66.2)
>12 years	2,328	1,596	74.9	(72.4-77.4)
Marital Status				
Married	3,833	2,293	68.2	(66.0-70.4)
Unmarried	2,176	1,169	57.6	(53.9-61.3)
Medicaid Status				
Medicaid ^d	3,189	1,516	51.2	(48.3-54.1)
Cash Assistance ^e	1,132	551	47.3	(41.8-52.8)
Pre-First Steps (FS) Medicaid Onlyf	1,262	588	54.3	(50.0-58.6)
First Steps Expansion ⁹	795	377	51.4	(45.9-56.9)
Non-Medicaid ^h	2,815	1,943	74.7	(72.3-77.1)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	353	188	58.7	(49.9-67.5)
Normal Birth Weight (≥2500 g)	5,652	3,271	65.6	(63.6-67.6)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State

birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =14. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

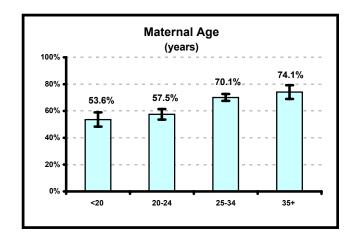
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

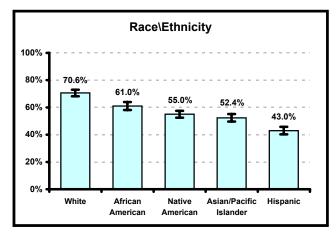
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

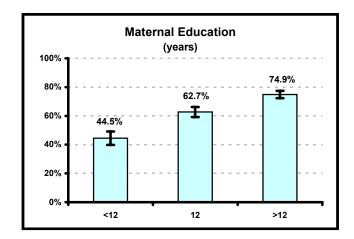
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

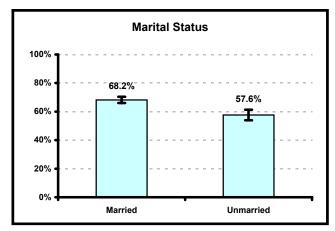
^hNon-Medicaid - women not enrolled in Medicaid.

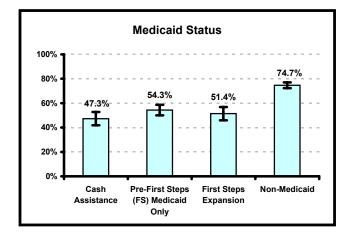
Figure 5.21: Women who reported that during their most recent pregnancy, a friend would have helped them if a problem had come up. Washington State PRAMS 1996-1998

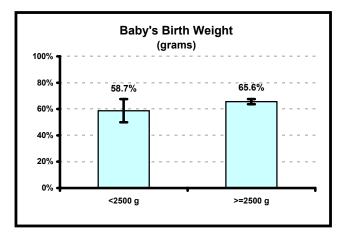












Survey Question 58:

During your most recent pregnancy, who would have helped you if a problem had come up? (For example, who would have helped you if you needed to borrow \$50 or it you got sick and had to be in bed for several weeks?). **Check all that apply.**

e. Someone else

No (88.1%) Yes (11.9%)

Summary of Results:

Someone Else Would Help with a Problem during the Most Recent Pregnancy (Table 5.22 & Figure 5.22)

- ☐ Almost twelve percent (11.9%) of women reported someone else would have helped them if a problem had come up during their most recent pregnancy. These women were more likely to be:
 - ➤ Women with more than a high school education
 - Married
 - ➤ Non-Medicaid recipients
- ☐ Approximately 12.5 percent of White women reported that someone else would have helped them if a problem had come up during their most recent pregnancy compared to Asian/Pacific Islander women (7.0%).
- ☐ There was no association between women's report that someone else would have helped them if a problem had come up during their most recent pregnancy and maternal age and the infant's birth weight status.

Table 5.22: Women who reported that during their most recent pregnancy, someone else would have helped them if a problem had come up.

Maternal	Respondents	Yes	% Yes ^o	95% CI	
Characteristics ^a	(n= 6,013)	(n= 632)	(%= 11.9)	(10.5-13.3)	
Maternal Age					
<20 years	1,020	100	9.3	(6.4-12.2)	
20-24 years	1,548	144	8	(5.8-10.2)	
25-34 years	2,866	323	13.8	(11.8-15.8)	
35+ years	578	65	14.3	(10.0-18.6)	
Race/Ethnicity					
White	1,409	180	12.5	(10.7-14.3)	
African American	964	105	11.3	(9.3-13.3)	
Native American	1,246	121	9.8	(8.2-11.4)	
Asian/Pacific Islander	1,203	88	7.0	(5.6-8.4)	
Hispanic	1,191	138	11.4	(9.6-13.2)	
Maternal Education ^c					
<12 years	1,318	121	7.9	(5.5-10.3)	
12 years	1,708	173	9.9	(7.7-12.1)	
>12 years	2,328	277	15.0	(12.8-17.2)	
Marital Status					
Married	3,832	417	13.2	(11.6-14.8)	
Unmarried	2,170	214	8.5	(6.5-10.5)	
Medicaid Status					
Medicaid ^d	3,183	298	9.1	(7.5-10.7)	
Cash Assistance ^e	1,128	103	7.5	(4.8-10.2)	
Pre-First Steps (FS) Medicaid Onlyf	1,260	120	10.5	(7.8-13.2)	
First Steps Expansion ⁹	795	75	8.9	(5.8-12.0)	
Non-Medicaid ^h	2,814	332	13.8	(11.8-15.8)	
Baby's Birth Weight (grams)					
Low Birth Weight (<2500 g)	352	32	11.7	(5.8-17.6)	
Normal Birth Weight (≥2500 g)	5,646	596	11.9	(10.5-13.3)	

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =21. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

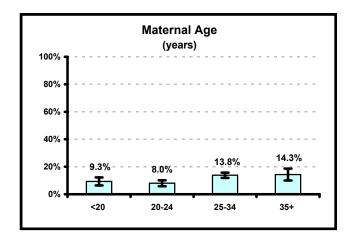
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

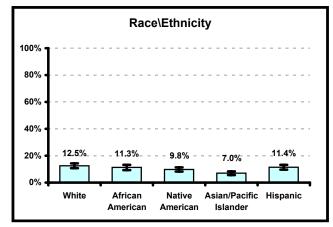
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

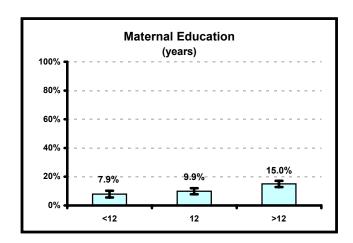
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

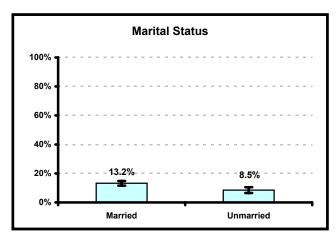
ⁿNon-Medicaid - women not enrolled in Medicaid.

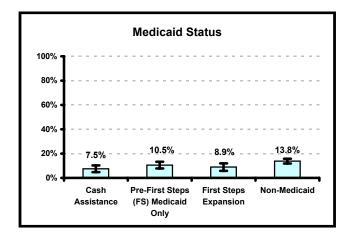
Figure 5.22: Women who reported that during their most recent pregnancy, someone else would have helped them if a problem had come up.

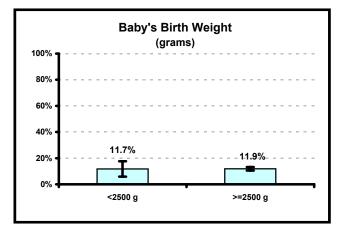












Survey Question 59:

During your most recent pregnancy, how much emotional support did you receive from your husband or partner? Emotional support included things such as comfort when you are upset or sad, listening to your worries and concerns, sharing your joys and sorrows.

As much as I wanted (68.0%)
Less than I wanted (27.9%)
I didn't have a husband or partner (4.1%)

Summary of Results:

Received as Much Emotional Support as Wanted from Husband or Partner during the Most Recent Pregnancy (Table 5.23 & Figure 5.23)

- ☐ Sixty-eight percent of women said they received as much emotional support as they wanted from their husband or partner during their most recent pregnancy. These women were more likely to be:
 - ➤ Women aged 25 years or older
 - ➤ Asian/Pacific Islander
 - Married
 - ➤ Non-Medicaid recipients
- □ Women who had more than a high school education (71.9%) were significantly more likely to report they received as much emotional support as they wanted from their husband or partner during their most recent pregnancy compared to those who had less than a high school education (60.9%).
- ☐ Receiving as much emotional support as wanted from husband or partner during most recent pregnancy was not associated with the infant's birth weight status.

Table 5.23: Women who reported that during their most recent pregnancy they received as much emotional support as they wanted from their husband or partner

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,956)	(n= 3,846)	(%= 68.0)	(66.0 - 70.0)
Maternal Age				
<20 years	1,011	528	55.6	(50.1 - 61.1)
20-24 years	1,538	937	63.0	(59.1 - 66.9)
25-34 years	2,835	1,979	72.6	(70.1 - 75.1)
35+ years	571	402	72.6	(67.1 - 78.1)
Race/Ethnicity				
White	1,400	970	68.8	(66.4 - 71.2)
African American	952	509	52.4	(49.3 - 55.5)
Native American	1,239	687	53.8	(51.3 - 56.3)
Asian/Pacific Islander	1,188	886	73.8	(71.3 - 76.3)
Hispanic	1,177	794	67.1	(64.4 - 69.8)
Maternal Education ^c				
<12 years	1,304	774	60.9	(56.4 - 65.4)
12 years	1,694	1,055	66.5	(63.0 - 70.0)
>12 years	2,309	1,622	71.9	(69.2 - 74.6)
Marital Status				
Married	3,792	2,852	76.2	(74.2 - 78.2)
Unmarried	2,154	988	46.4	(42.7 - 50.1)
Medicaid Status				
Medicaid ^d	3,148	1,772	58.3	(55.4 - 61.2)
Cash Assistance ^e	1,117	484	44.2	(38.7 - 49.7)
Pre-First Steps (FS) Medicaid Onlyf	1,240	742	62.7	(58.4 - 67.0)
First Steps Expansion ⁹	791	546	68.7	(63.4 - 74.0)
Non-Medicaid ^h	2,792	2,068	74.6	(72.2 - 77.0)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	348	218	73.1	(65.5 - 80.7)
Normal Birth Weight (≥2500 g)	5,593	3,615	67.7	(65.7 - 69.7)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =78. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid - women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First Steps Expansion.

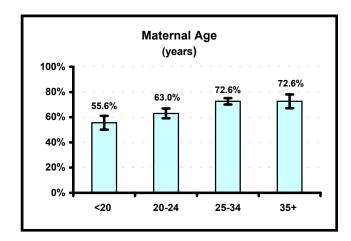
^eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

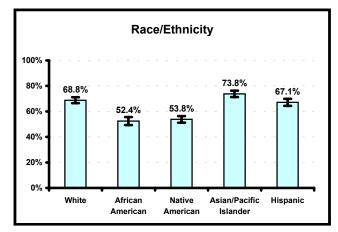
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

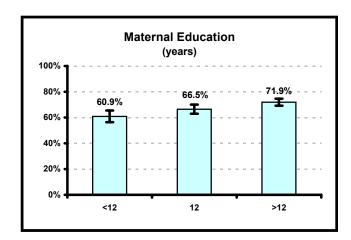
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

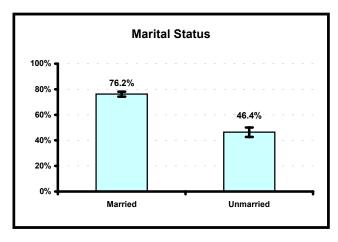
ⁿNon-Medicaid - women not enrolled in Medicaid.

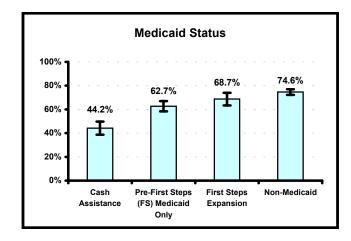
Figure 5.23: Women who reported that during their most recent pregnancy they received as much emotional support as they wanted from their husband or partner

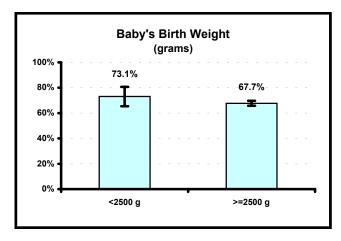












Survey Question 59:

During your most recent pregnancy, how much emotional support did you receive from your husband or partner? Emotional support included things such as comfort when you are upset or sad, listening to your worries and concerns, sharing your joys and sorrows.

As much as I wanted (68.0%)
Less than I wanted (27.9%)
I didn't have a husband or partner (4.1%)

Summary of Results:

Received Less Emotional Support from Husband or Partner during the Most Recent Pregnancy (Table 5.24 & Figure 5.24)

Almost thirty percent (27.9%) of women reported they received less emotional support than they wanted from their husband or partner during their most recent pregnancy. These women were more likely to be:
➤ Unmarried
Medicaid recipients (specifically Cash Assistance)
Teenagers (34.6%) were significantly more likely to report they received less emotional support than they wanted from their husband or partner during their most recent pregnancy compared to women aged 25 to 34 years (25.2%).
African American women (38.7%) were significantly more likely to report they received less emotional support than they wanted from their husband or partner during their most recent pregnancy compared to Asian/Pacific Islander women (22.0%), Hispanic women (24.1%), and White women (28.3%).
Receiving less emotional support from husband or partner during the most recent pregnancy was not associated with the infant's birth weight status.

Table 5.24: Women who reported that during their most recent pregnancy, they received less emotional support than they wanted from their husband or partner.

Maternal	Respondents	Yes	% Yes ^b	95% CI
Characteristics ^a	(n= 5,956)	(n= 1,724)	(%= 27.9)	(26.1-29.7)
Maternal Age				
<20 years	1,011	363	34.6	(29.5-39.7)
20-24 years	1,538	480	31.5	(27.6-35.4)
25-34 years	2,835	743	25.2	(22.8-27.6)
35+ years	571	138	24.8	(19.3-30.3)
Race/Ethnicity				
White	1,400	393	28.3	(25.9-30.7)
African American	952	363	38.7	(35.8-41.6)
Native American	1,239	429	35.3	(32.9-37.7)
Asian/Pacific Islander	1,188	256	22.0	(19.6-24.4)
Hispanic	1,177	283	24.1	(21.7-26.5)
Maternal Education ^c				
<12 years	1,304	384	30.0	(25.7-34.3)
12 years	1,694	521	29.8	(26.3-33.3)
>12 years	2,309	626	26.0	(23.3-28.7)
Marital Status				
Married	3,792	898	23.4	(21.4-25.4)
Unmarried	2,154	822	39.6	(35.9-43.3)
Medicaid Status				
Medicaid ^d	3,148	1,030	33.0	(30.1-35.9)
Cash Assistance ^e	1,117	422	40.4	(34.9-45.9)
Pre-First Steps (FS) Medicaid Only ^f	1,240	393	30.1	(25.8-34.4)
First Steps Expansion ⁹	791	215	28.2	(22.9-33.5)
Non-Medicaid ^h	2,792	687	24.4	(22.0-26.8)
Baby's Birth Weight (grams)				
Low Birth Weight (<2500 g)	348	101	20.7	(13.8-27.6)
Normal Birth Weight (≥2500 g)	5,593	1,623	28.3	(26.3-30.3)

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; and Medicaid status from linkage with Washington State First Steps Database.

Missing responses =78. CI = Confidence Interval. White includes other/unknown (3.5%).

^bPercentage Weighted to Washington State Birth Population (Total N = 207,831).

^c10% or more of the Maternal Education data are missing from birth certificate data.

^dMedicaid-women on Cash Assistance, Pre-First Steps (FS) Medicaid Only, or First steps Expansion

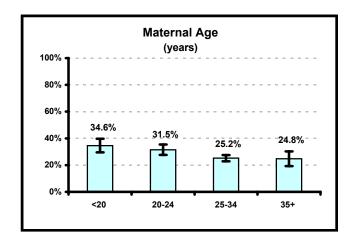
eCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

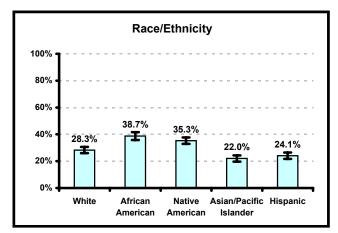
^fPre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only. This group includes women not eligible for cash assistance.

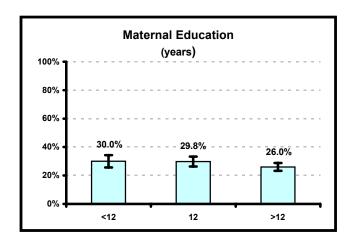
⁹First Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

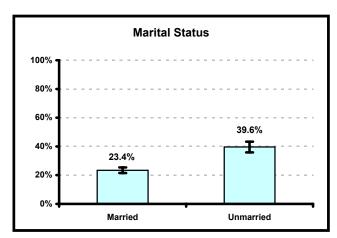
^hNon-Medicaid - women not enrolled in Medicaid.

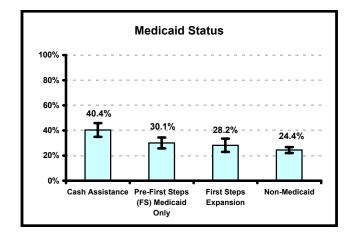
Figure 5.24: Women who reported that during their most recent pregnancy, they received less emotional support than they wanted from their husband or partner.

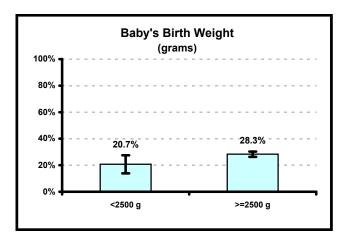












APPENDICES

WASHINGTON STATE PRAMS 1996-1998



Data Collection

Methodology

Data Sources. Three data sources are used to create a final, weighted PRAMS analysis data set: birth certificate data, operational data, and questionnaire data. The PRAMS analysis data set cannot be produced unless all three sources of data are in place.¹

- *i.* Birth Certificate Data. Birth certificates are essential to PRAMS data collection for three reasons: 1) They provide the sampling frame from which births are stratified and then randomly selected for PRAMS surveillance; 2) PRAMS data collected from mothers are weighted with birth certificate information; and 3) Birth certificates serve as a source of demographic and clinical information about the sampled mother and the infant in Washington State.
- ii. Operational Data. PRAMS operational data are generated by PRAMTrac, a customized tracking software program developed by the CDC to assist the Project Coordinator and the Data Manager in PRAMS activities. PRAMTrac is supplied to states by CDC; CDC provides training in the use of the software. PRAMTrac aids in monitoring data collection activities for each batch and generates monthly batch reports that summarize the results of the data collection effort. Sampled women are tracked until they either complete a questionnaire or are classified as a non-respondent. Operational data generated by PRAMTrac are used to calculate response rates to monitor the quality of operations. They are also used for analysis of PRAMS survey methodology.
- *Questionnaire Data.* Self-reported data from sampled women are collected by mail and by telephone. The PRAMS questionnaire serves as the principal source of maternal behavioral information for the time before, during, and after the mother's most recent pregnancy.

Method of Surveillance. Standardized data collection methods for the PRAMS survey were developed by CDC to allow for comparisons among states and for single-state or multi-state analysis.² PRAMS is a "mixed mode" surveillance system that combines two modes of data collection. The mailed questionnaire is the primary data collection method. Up to two self-administered surveys are mailed to sampled women, and then multiple attempts to follow-up nonrespondents are conducted by telephone.^{1,2,3} The methodology behind mail/telephone survey methods used by CDC is based on research conducted by Don Dillman.⁴ One key component of his approach is to make numerous and varied random contacts with sample mothers.^{3,4}

Data Collection Instruments

The PRAMS Questionnaire. In 1987, Phase 1 of the PRAMS questionnaire was developed with the aid of numerous individuals within and outside of CDC. To create the questionnaire, an extensive list of potential topics were identified and researched by staff in the Division of Reproductive Health at CDC. From this list, questions were developed and pretested using cognitive techniques and revised according to pretest results. This questionnaire was used by the original PRAMS states from Fall 1988 until it was revised in 1989.^{1,2}

In 1989, the Phase 1 questionnaire was evaluated and revised by CDC and participating states. This revision resulted in the Phase 2 questionnaire, which was implemented in 1990. Although the questionnaire maintained its original structure, selected questions were revised, some were deleted, and new questions were added. ^{1,2}

In 1994, CDC collaborated with the participating states to revise and develop a Phase 3 questionnaire. As with the first and second questionnaires, a list of potential topics was extensively researched. The original structure of the questionnaire was retained, but several questions were revised, dropped or added. During the revision process, a set of standard state-specific questions was developed. States were able to select questions from the standard set, use existing state-developed questions, or develop new questions of their own.

The Phase 3 questionnaire is 14 pages in length and has a colorful cover designed by Washington State PRAMS staff. This questionnaire is slightly smaller than an 8 1/2" x 11" sheet of paper, and contains an extra page for comments from the mother. The questionnaire contains a total of 66 questions; the first 52 questions are core questions and the remaining 14 are state-specific questions.

The data for this report, which is from the surveillance period April 1996 through December 1998, have been drawn from the Phase 3 questionnaire.

Criteria for Selection of Questions. The following criteria were used to determine the content areas of the questionnaire ¹:

	The usefulness of the information to develop and target specific interventions to reduce infant morbidity and mortality.
	The likelihood that valid information can be collected from the mother two to six months after delivery.
	The estimated prevalence of the behavior, attitude, or experience.
	The availability of state-level information from other data sources.
	The importance of the information as a co-variate for the association between behavior, attitude, or experience, and infant morbidity and mortality.
П	The likelihood that sensitive information can be elicited from the mother

	program needs.
Types o	of Questions
_	stions. The core portion of the survey is used by all participating PRAMS states and the following topic areas:
	Obstetric history/risk factors: a history of previous live births, low birth weight newborn, premature delivery; confirmation of pregnancy status, prepregnancy weight and height.
	Mother's feelings about the timing of pregnancy
	Maternal economic status: Health insurance participation, Medicaid participation, WIC participation, housing density, household size after delivery, and sources of family income.
	Birth control utilization at conception
0	Prenatal care: Timing of prenatal care initiation, satisfaction with prenatal care, barriers to prenatal care, number of prenatal care visits per month, site of prenatal care visit, source of prenatal care payment, and prenatal provider discussion of maternal risk behaviors.
	Folic acid awareness
	Prenatal maternal behaviors and experiences: Cigarette smoking, alcohol use, psychosocial stress during the 12 months prior to delivery, and physical abuse before and during pregnancy.
	Prenatal hospitalization
	Labor and delivery for mother and infant: Hospital length of stay for mother and infant, source of payment for delivery
	Infant health: Neonatal Intensive Care Unit (NICU) utilization, breast-feeding,

☐ The state's need for the information for the year 2010 health objectives or other

State-Developed questions. The state-specific portion is composed of questions developed by the Washington State PRAMS Advisory Committee to meet Washington State's needs. The process for developing the questions involved: committee selection of high priority topics; development of questions pertaining to the priority topics; revision of questions to fit a survey format; and ranking questions to determine those to be included in the survey. After the questions were selected, the state-specific questions were pre-tested with a variety of individuals from various backgrounds. The Washington state-specific component covers the following topic areas:

infant smoke exposure, sleep position, well and ill baby care

Mother's perception of husband or partner's feelings about timing of the pregnancy
Household size and income at conception
Prenatal care provider discussion of maternal risk behaviors: Postpartum depression, weight gain during pregnancy, family history of diseases or birth defects, and genetic testing for birth defects or genetic diseases
Social support availability for mother during pregnancy and after delivery
Emotional support by husband or partner during pregnancy
Hospital length of stay after delivery for mother
Postpartum birth control utilization
Infant safety: smoke alarm in home, water heater temperature, car seat use, and firearms in home

Mode of Questionnaire Administration. Survey methodology emphasized the importance of using the appropriate questionnaire format for the mode in which the respondent will complete the questionnaire. Because PRAMS employs two modes, two types of questionnaire are required.¹

- *i.* Self-administered Questionnaire. In mail surveillance, the self-administered questionnaire booklet is mailed to all sampled women. The questionnaire is designed to be read and filled out by the respondent without the presence of an interviewer. All instructions and skips are clearly noted in the booklet so that the respondent can complete the questionnaire by herself.
- *ii. Interviewer-administered Questionnaire.* In telephone follow-up, however, an interviewer must administer the questionnaire. Therefore, the layout must be formatted differently than the self-administered questionnaire. The interviewer-administered questionnaire includes prompts and instructions for the interviewer that are not read aloud to the respondent. The interviewer-administered questionnaire format ensures that all interviewers deliver questions and instructions uniformly and consistently with the self-administered questionnaire.

Translation of Questionnaires. The Washington State PRAMS questionnaire is available in English and Spanish. Formatting and appearance are the same in both versions of the questionnaire. Translation of the PRAMS questionnaires (mail and telephone versions) into Spanish are completed by CDC, with state reviewers. Translation of the questionnaires by a single source ensure consistency of question content across all states and populations.

Data Collection Procedures

Timing and Contacts. Every month, a stratified random sample of 100-250 new mothers (who are two to six months postpartum) is selected from a frame of eligible Washington State birth certificates to be used for the PRAMS survey. As multiple contacts have been demonstrated to increase response rates⁴, this methodology is employed in PRAMS. Below is the sequence of contacts for Washington State PRAMS surveillance. 1,2,3

- *i. Preletter.* The preletter is mailed to all sampled mothers. The preletter introduces the mother to PRAMS and informs her that she will be receiving a PRAMS questionnaire packet in the mail.
- *ii. Initial PRAMS Questionnaire Packet.* The initial mail questionnaire packet is sent to all sampled mothers 7 days after the preletter. The packet contains the following items: a personalized letter explaining PRAMS; the 14-page questionnaire booklet containing a self-addressed stamped enveloped; a question-and-answer brochure that contains addition information and answers to questions frequently asked about PRAMS; a calendar, as a memory aid; and a participation incentive.
- *iii. Tickler (Reminder Letter).* The tickler serves as a thank you/reminder letter and is sent to all sampled mothers 10 days after the initial mailing, except for those who have responded, refused, or whose mail has been returned undelivered.
- *iv.* Second Mail Questionnaire Packet. The second mail questionnaire packet is sent 14 days after the tickler to all sampled mothers who have not responded or refused.
- v. Telephone Follow-up. Washington State PRAMS staff telephone mothers who do not respond 14 days after the second mailing of the questionnaire. Interviewers call women to encourage completion of an interviewer-administered survey over the telephone.

Mail/Phone schedule. The Mail/Phone phase of the project is managed by the Operations Manager. The Operation manager coordinates the activities of the Survey Assistants, who assist with the mailings, data entry and telephone interviews. The following is a list of the schedule of events for the Mail/Phone Survey process the batch period¹:

Day 1: Sample batch and create: BCENTRY.DAT, list of long addresses, list of infants at risk of death, list of Medicaid recipients, and a list of Hispanic mothers in sample. Download BCENTRY.DAT into PRAMTrac.
Day 2: Clean up any mothers' records with blank last name, correct addresses, eliminate any out of state residents, etc.
Day 3: Prepare and mail pre-letter. Identify/verify status of at risk infants.

	Day 10: Prepare and mail the first survey with a return address packet. Identify multiple births and select which infant to follow in the survey.
	Day 20: Prepare and mail a reminder letter (Tickler).
	Day 34: Prepare and mail second survey with return address packet.
	Day 41: Forward to phone phase. Print a listing of new moms and begin locating phone numbers. Check Internet listings or contact Directory Assistance and Medical Assistance Administration for additional phone listings.
	Day 48: Begin calling moms. During the next 3 weeks, at least 15 attempts are made to contact the mother. Calls are made during the morning, afternoon and evening, seven days a week. Calls are conducted both to English and Spanish speaking survey recipients.
	Day 75: Clean up, close the batch, and export the files to CDC as identified in CDC instructions.

References:

¹ <u>Pregnancy Risk Assessment Monitoring System (PRAMS): CDC Model Surveillance Protocol 1999.</u> Maternal and Child Health Assessment Section, Community and Family Health, Washington State Department of Health, 1999.

² <u>Pregnancy Risk Assessment Monitoring System (PRAMS) Surveillance Report: 1993-1994.</u> Maternal Health Assessment Section, Community and Family Health, Washington State Department of Health, 1996.

³ Colley Gilbert B, Johnson CH, Morrow B, Ahluwalia IB, Gaffield ME, Fischer L, Rogers M, Whitehead N. <u>PRAMS 1997 Surveillance Report.</u> Atlanta, GA: Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention, 1999.

⁴ Dillman DA. Mail and telephone surveys: the total design method. New York: John Wiley & Sons, 1978.



The Sampling and Weighting Process

The purpose of the PRAMS data is to provide state-specific estimates of maternal and child health indicators for Washington State mothers who delivered a live born infant.

Sampling Process

Producing a sample of mothers has two steps: constructing the frame and drawing the sample.

Constructing the Sampling Frame. The sampling frame is prepared from monthly batches of Washington State birth certificates. Birth data are read into a SAS file that creates five categories by race/ethnicity. The sampling frame is then created by excluding records for the following reasons: 1) the infant was born less than 61 days ago (these infants were eligible for inclusion in a later sampling frame) or more than 151 days from the projected survey arrival date; 2) the infant was born out of state; 3) the mother was not a Washington State resident; 4) the mother's maiden name was missing; or 5) the infant resulted from a multiple birth and was not the one infant from the multiple birth selected for inclusion in the survey. The infant record selected from a multiple birth is based on the correspondence between its order at delivery and the time of year the birth occurred (the first born of twins is selected if the birth occurred January-June, the second born is selected if the birth occurred July-December). (NOTE: Exclusions of Adoptions: If an infant is adopted prior to sampling, the birth record is excluded from the sampling frame. Birth files are amended when an adoption takes place. Adoptions are identified and excluded by Vital Statistics prior to sending the birth certificate date to Washington State PRAMS. Adoptions records are continuously updated). For those infants who were not included in the PRAMS sample, efforts were made to compare their profile as a group to the PRAMS frame and to determine whether the population and sample strata differ significantly from the frame. Mothers of infants who died were included in the frame and were contacted through a separate mailing. Respect for their loss and sensitivity in questioning was considered when contacting these mothers.²

Drawing the sample. Between the 1st and the 5th of every month, the Washington State Center for Health Statistics sends a birth certificate file to be used as input for the PRAMS sampling program. Most of the infants in the birth certificate files are either two or three months of age when sampled by PRAMS and mothers are contacted up to six months postpartum. Sampling on a monthly basis continues to ensure that mothers are contacted in a timely manner and that there is a balanced workload for PRAMS staff. The birth file is sent for weighting on or before September for the previous year. ¹

Sampling Strata

The Washington State PRAMS sample for this report was stratified by race/ethnicity, based on birth certificate information. From April 1996 through December 1998, the five sampling strata of racial/ethnic groups were ethnic Hispanic (of any race), non Hispanic African American,

Asian/Pacific Islander, Native American and the combination of white and other/unknown. Oversampling of subjects by race other than white was conducted to increase the reliability of estimates for these groups.¹

Within each sampling strata, each record has an equal probability of being selected (without replacement). The sampling targets for each stratum were 400 completed surveys, a total of approximately 2,000 surveys per year. This sampling target is CDC PRAMS minimum recommended sample size to enable stratum specific analyses on a yearly basis.¹

Survey Response Rates

From April 1996 through December 1998, 8,563 mothers who delivered infants were sent the Washington State PRAMS survey. Among those mothers who were surveyed, 6,034 (70.5%) responded to the survey. The majority of nonrespondents to the survey were comprised of mothers who did not return the questionnaire or could not be contacted because of incorrect address and/or phone number. Other possible reasons that may explain the survey nonresponse rate are phone and mail refusals, or a language barrier.

In late 1993, Spanish language surveys and Spanish language phone follow-up became available which contributed to an improvement in the Hispanic response rate. Translation to other non-English speaking populations is not available at this time for states participating in PRAMS.

Birth certificate information from non-respondent and respondent mothers to the PRAMS survey, which was administered from April 1996 through December 1998, is displayed in Table 6.1. The results show that maternal attributes associated with a lower survey response rate were maternal age younger than 20, African American and Native American race, unmarried, receiving Medicaid, and having delivered a low birth weight infant (< 2500 grams). However, the survey response rates increased with mother's educational level. Approximately 12.8% of the maternal education data was missing from the Washington State birth certificates.

Response Bias. When survey completion is less than 100 percent and respondents are not representative of the sampled population, response bias can occur. (In most cases, survey respondents are of higher socio-economic status and healthier than are nonrespondents to questionnaires). Response bias can be reduced by ensuring a high response rate. The CDC PRAMS considers a response rate of 70 percent as a minimum threshold below which unacceptable response bias may occur.²

Weighting Process

The Washington State PRAMS survey is designed to provide state estimates about resident mothers who delivered live born infants during the sampling period. Washington State PRAMS data can be weighted to obtain statewide birth population estimates, because the data are based on a probability sample of Washington State birth certificates.

Each PRAMS respondent receives an analysis weight, which is equivalent to the number of mothers that she represents in the population. The analysis weight is the product of three subcomponents: sampling weight, nonresponse weight, and frame noncoverage weight.² An

analysis weight of zero was assigned to mothers who did not respond to the PRAMS questionnaire.

- i. Sampling Weights. The sampling weights adjust for the effect of the sampling design. The sampling weights are calculated by dividing the number of mothers on the sampling frame for a given stratum by the number of mothers sampled for that stratum. This weight is the reciprocal of the sampling fraction for the sample, in each sampling stratum. Failure to apply sampling weights to the data may result in biased population estimates.
- ii. Nonresponse Weight. In PRAMS, four ethnic minorities are oversampled, to increase their numbers for analysis in this survey. Survey response rates vary by sampling stratum. The nonresponse weight is the ratio of the sample size in a stratum-specific response category to the number of respondents in the same category. The rate of response within a given stratum determines the magnitude of adjustment for nonresponse. Nonresponse weighting is conducted by increasing the weight of respondents that are similar to nonrespondents on known birth certificate information. From previous analyses of the 1993-1994 Washington State PRAMS survey, even after nonresponse adjustment is performed, PRAMS estimates may underestimate population risk for some measures because higher-risk women are less likely to respond even within groups distinguished by nonresponse.

Frame Noncoverage Weight. Each year, Washington State sends the calendar year birth tape to CDC where it is compared to the frame files for that given year of births. Frame noncoverage weights are created to adjust for omission of birth records in the sampling frame. The effect of the frame noncoverage weight is to ensure that the totals estimated from the sample data are similar to the totals from the birth tape.

Estimating Standard Errors for PRAMS Data

The standard error is a measure of the average deviation of summary statistics (means, proportions, rates) around their mean.³ Differential probabilities of selection increase the sampling error when estimating population parameters over aggregated sampling strata.²

To account for the complex sampling design of PRAMS, the Washington State Department of Health and the CDC recommend using the statistical software packaged "Software for Survey Data Analysis" (SUDAAN). SUDAAN was developed by the Research Triangle Institute in collaboration with the National Center for Health Statistics and other Public Health Service agencies. It uses first-order Taylor series approximations to calculate sampling variances and standard errors for the population estimates. Standard errors are used to calculate 95% confidence intervals (CI = percentage \pm (1.96 * standard error)).

In the 1996-1998 Washington State PRAMS Surveillance Report, 95% confidence intervals are presented for all population estimates. Confidence intervals that overlap indicate that the sampling values of the strata being compared are not statistically different from each other, and are unable to support inference that the population estimates of those strata are in fact different.²

Confidence intervals estimate the range of values, which includes the true population estimate for that indicator.^{1,4} However, confidence intervals can not be used to determine other possible sources of bias in an estimate, such as non-response bias, recall bias, failure to understand questions, and socially approved response bias.²

Recall Bias

PRAMS data are self-reported and are based on events and feelings of women surveyed that may have occurred more than a year prior to the implementation of the survey. Recall bias may occur if the respondents do not accurately remember prior events. Events that occurred before conception or early in pregnancy will tend to be more misreported than events that occurred near to the time that the PRAMS survey was completed. Survey respondents may also be less likely to report or may deny socially disapproved behaviors (e.g. smoking and drinking during pregnancy) in order to minimize involvement with this risky behavior. Therefore, PRAMS data regarding smoking and drinking behaviors may be underreported as most pregnant women are warned about the effects of exposing the fetus to tobacco and alcohol.²

References:

¹ Pregnancy Risk Assessment Monitoring System (PRAMS): CDC Model Surveillance Protocol 1999. Maternal and Child Health Assessment Section, Community and Family Health, Washington State Department of Health, 1999.

² Pregnancy Risk Assessment Monitoring System (PRAMS) Surveillance Report: 1993-1994. Maternal and Child Health Assessment Section, Community and Family Health, Washington State Department of Health, 1996.

³ Rosenburg D and Handler A. Descriptive Epidemiology and Statistical Estimation, In: Analytic Methods in Maternal and Child Health, Handler A., Rosenburg, D., Monahan, C., and Kennelly, J. (eds.), Maternal and Child Health Bureau, HRSA, DHHS, 1998.

⁴ Colley Gilbert B, Johnson CH, Morrow B, Ahluwalia IB, Gaffield ME, Fischer L, Rogers M, Whitehead N. PRAMS 1997 Surveillance Report. Atlanta, GA: Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention, 1999.

Table 6.1: Survey Response Rates

				Non-	Non-
Maternal	Total	Respondents	Respondents	Respondents	Respondents
Characteristics ^a	Surveyed	(N)	(%)	(N)	(%)
Total	8,563	6,034	70.5	2,529	29.5
Maternal Age					!
<20 years	1,431	1,021	71.3		28.7
20-24 years	2,325	1,557	67.0	768	33.0
25-34 years	3,992	2,876	72.0	,	28.0
35+ years	813	579	71.2		28.8
Missing	2	1	50.0	1	50.0
Race/Ethnicity					
White	1,712	1,410	82.4		17.6
African American	1,551	969	62.5		37.5
Native American	1,970	1,252	63.6	718	36.5
Asian/Pacific Islander	1,713	1,208	70.5		29.5
Hispanic	1,617	1,195	73.9	422	26.1
Missing	0	0	0.0	0	0.0
Maternal Education ^b					
<12 years	2,095	1,323	63.2		36.8
12 years	2,449	1,717	70.1		29.9
>12 years	2,923	2,331	79.8		20.3
Missing	1,096	663	60.5	433	39.5
Marital Status					
Married	5,114	3,842	75.1	1,272	24.9
Unmarried	3,433	2,181	63.5	1,252	36.5
Missing	16	11	68.8	5	31.3
Medicaid Status					
Medicaid ^c	4,874	3,201	65.7	1,673	34.3
Cash Assistance ^d	1,955	1,137	58.2	818	41.8
Pre-First Steps (FS) Medicaid Only ^e		1,266	68.6	579	31.4
First Steps Expansion ^f	1,074	798	74.3	276	25.7
Non-Medicaid ^g	3,658	2,817	77.0	841	23.0
Missing	31	16	51.6	15	48.4
Baby's Birth Weight (grams)					
Low Birth Weight (<2500 g)	541	355	65.6	186	34.4
Normal Birth Weight (≥2500 g)	8,000	5,664	70.8	2,336	29.2
Missing	22	15	68.2	7	31.8

^aMaternal Characteristics: age, race/ethnicity, education, marital status, baby's birth weight obtained from Washington State birth certificates; Medicaid status from linkage with Washington State First Steps Database; and prenatal care sites from PRAMS. White includes other/unknown (3.5%).

^b10% or more of the Maternal Education data are missing from birth certificate data.

^cMedicaid - women on Cash Assistance, Pre-First

^dCash Assistance - very low income women (below 65% of the federal poverty level) eligible for cash assistance and Medicaid.

ePre-First Steps (FS) Medicaid Only - low income women (below 90% of the federal poverty level) eligible for Medicaid Only.

This group includes women not eligible for cash assistance.

^fFirst Steps Expansion - women eligible for Medicaid with incomes below 185% of the federal poverty level, but not in the Cash Assistance or FS Medicaid Only groups.

⁹Non-Medicaid - women not enrolled in Medicaid.



Technical Notes

Below are the topics covered in volume one through four of the 1996-1998 Washington State PRAMS Surveillance Report:

Vc	olume I
	Folic Acid Awareness
	Pregnancy Intention and Birth Control Use
	Prenatal Care
	Hospital Stays for Labor and Delivery
	Breast-feeding
Vc	olume II
	Tobacco Use and Infant Exposure to Cigarette Smoke
	Alcohol Use
	Illegal Drug Use
Vc	olume III
	Selected Maternal Risk Factors Discussed by Prenatal Health Care Providers
Vc	olume IV
	Physical Abuse Around the Time of Pregnancy
	Infant Safety
	Infant Sleep Position
	Stress and Social Support

States Participating in PRAMS from 1996-1998

Alabama Louisiana Washington Alaska Maine West Virginia

Arkansas New Mexico

Colorado New York (excluding NYC)

Florida North Carolina Georgia Oklahoma Illinois South Carolina

For more information on PRAMS programs in other states, please contact the Centers for Disease Control and Prevention (CDC) at:

http://www.cdc.gov/nccdphp/drh/srv prams.htm.

Web Sites

CDC PRAMS web site: http://www.cdc.gov/nccdphp/drh/srv prams/

Washington State PRAMS web site: http://www.doh.wa.gov/cfh/prams/

Washington State Department of Health website: http://ww.doh.wa.gov/

Note: The Washington State PRAMS Surveillance Report – Volume IV will be available on the Washington State Department of Health web site by June 2002.